DOCUMENT RESUME

ED 376 680 EC 303 510

AUTHOR	Browning, Philip, Ed.
TITLE	Transition IV in Alabama: A Profile of Commitment. Proceedings of the Annual Statewide Conference on Transition (4th, Auburn, Alabama, January 1995).
INSTITUTION	Auburn Univ., AL. Dept. of Rehabilitation and Special Education.
PUB DATE	Jan 95
NOTE	206p.; For related documents, see EC 303 507-509. Photographs may not reproduce.
AVAILABLE FROM	Auburn University, 1234 Haley Center, Auburn, AL 36849-5226 ($6).
PUB TYPE	Collected Works - Conference Proceedings (021)
EDRS PRICE	MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS	Curriculum; Definitions; Demonstration Programs; *Disabilities; *Education Work Relationship; *Family Involvement; Family Programs; High Schools; Independent Living; Job Placement; Postsecondary Education; Program Development; *Program Implementation; Rehabilitation; Self Determination; Services; State Programs; State Universities; Supported Employment; *Transitional Programs; Vocational Education; Vocational Rehabilitation
IDENTIFIERS	*Alabama

ABSTRACT

This proceedings document provides the texts of 23 presentations given at a conference in 1994 which focused on policies, materials, programs, and activities being implemented in Alabama to foster the successful transition of youth with disabilities to adult life. An initial paper compares the definition of transition developed by Andrew Halpern and adopted by the Council for Exceptional Children's Division of Career Development and Transition with the definition contained in the Individuals with Disabilities Education Act. The following papers are then presented: (1) "Decatur's Community Transition Team in the Making" (Emily Amberson); (2) "Anniston's School to Work Transition Program" (Keith Dear et al.); (3) "Calhoun Community College's Project GATE" (Virginia H. Smith); (4) "Mobile's Transition Advisory Committee" (Ann Hilderbrand); (5) "UAB's Independent Living Skills for Transition" (Cynthia W. Jackson and Kathryn Purvis); (6) "Alabama's IEP + LCCE" (Mabrey Whetstone); (7) "Transition Services and Opportunities in Your Alabama Community" (Beverly Lavender et al.); (8) "Mobile's Joint IEP/ITP Meetings" (Ann Hilderbrand); (9) "U of A's Self-Advocacy for Students with Learning Disabilities" (Rhett Brandt); (10) "Mobile's Vocational Rehabilitation Services in Transition" (Ann Hilderbrand); (11) "A 'Group Action Planning' Cookbook for Families, Friends, and Professionals" (Ann P. Turnbull and Rutherford Turnbull, III); (12) "Group Action Planning as a Strategy of Moving from Old to New Horizons in Transitional Planning" (Ann P. Turnbull and Rutherford Turnbull, III); (13) "Inclusion: One Parent's Story" (Susan Statum); (14) "Problem Assessment of Family Involvement in Transition" (Rebecca Curtis et al.); (15) "Parent Involvement in Transition: A Multicultural Perspective" (Katherine Winchester and Phyllis Williams); (16) "Embracing Families in the Transition Planning Process: Perceptions and Expectations" (Vivian Larkin and Jackie Echols); (17) "Lessons Learned along the Bumpy Way" (Mike McClanahan); (18) "Rural-Based Programs for Transition from School to Adult Life" (Thomas Sherburne et al.); (19) "Social Skills: Transitioning Students with Mild Learning Handicaps" (Virginia Chance); (20) "Transition of Individuals Who are Deaf or Hard of Hearing: A Literature Profile" (Linda Shumaker); (21) "Auburn's Master's Program in Special Education with an Emphasis in Secondary Education and Transition" (Caroline Dunn); (22) "Auburn's Undergraduate Rehabilitation Program with an Emphasis in Job Coaching" (Clarence Brown); and (23) "Distance Education in Transition: Another Auburn Training Strategy" (Philip Browning et al.). An annotated bibliography of 39 items on families in transition is provided. A list of conference participants and a cumulative index to the four conferences completes the proceedings. (DB)

ED 376 680

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☑ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality

- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy

TRANSITION IV
in
ALABAMA
A Profile of Commitment

SCHOOL
COMMUNITY

Philip Browning

State Conference Proceedings
January 1995

EC 303510

"PERMISSION TO REPRODUCE THIS MATERIAL IN OTHER THAN PAPER COPY HAS BEEN GRANTED BY
Philip Browning

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

BEST COPY AVAILABLE

TRANSITION
IN
ALABAMA
re We A

Transition IV in Alabama
A Profile of Commitment

Edited by

Philip Browning, Ph.D
Department of Rehabilitation and Special Education
College of Education
Auburn University

copies available through:

Department of Rehabilitation and Special Education
College of Education
1234 Haley Center
Auburn University, AL 36849

844-5943

The initial funding for this statewide conference was made available through Auburn University's Extension Division and the College of Education. All conference participants extend their appreciation for helping to make this event possible.

Auburn University is an equal opportunity
educational institution and employer

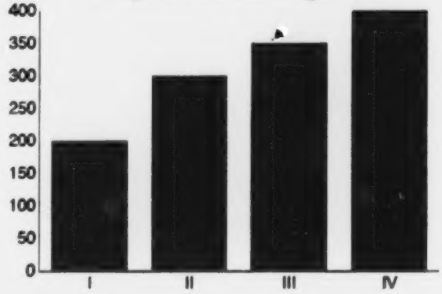
Dr. Ann P. Turnbull

"The major message that our family has learned is that the most successful way to accomplish transitional planning is through truly building a reliable alliance among professionals, families, friends, and community citizens where there is an opportunity for social connectedness and creative problem solving."

PREFACE

The purpose of Alabama's statewide transition conference is to increase transition-related activities at the state and local level. The intent is to generate new ideas, policies, and programs for improving the quality of the transition process and outcome. As well, one of its main objectives is to expand the "network" for all persons interested in Alabama's youth and young adults with disabilities, and, in the words of Dr. Turnbull, *"build a reliable alliance among them"* (see facing page). The annual event serves as one strategy for helping to advance this cause. Consider, for example, the increase in the number who have joined in the happening each year.

Conference Participants



Our consumer keynoter for Transition IV was Mr. Michael Tedder, a senior high school student from Birmingham. Be sure to read his *"thank you"* note (see page vii). While he says it meant a lot to him to be with us, I know that his very presence had an impact on us all as well. Remember his motto? *"If you spend your time working on your abilities, your disabilities become unimportant."* And who could forget his song?

A national leader served as our other keynote speaker. Dr. Ann Turnbull, Co-Director of the Beach Center on Families and Disability, University of Kansas, delivered a highly inspirational opening address on *"joyfully creating inclusion and celebrating its happening."* I strongly encourage you to read her (and her husband's) two papers on Group Action Planning, *"which occurs when family members, friends, and professionals create a reliable alliance with each other for the purpose of creating a different vision about what life can be when one has a disability."*

In addition to the Turnbulls' contribution, note that six other papers appear on the topic of family involvement in transition. I strongly encourage you to devote your attention to them, beginning with the two papers written by a parent (*Inclusion: One Parent's Story*) and a legal guardian (*Lessons Learned Along a Bumpy Road*). Who would argue with the fact that families are critical stakeholders who must be fully included as active participants in the transition process?

Another new program element was the number of preconference workshops provided, as well as the number who attended them. At Transition III, for example, we had but one all-day preconference workshop at which 60 people took part. By contrast, Transition IV drew over 400 people who attended one of four such workshops (e.g., Team Building). Yes, preconference workshops will be an integral part of the agenda at Transition V.

Finally, one of the highlights of last year's program was the awards presentation for outstanding students, employers, parents, and transition program. In addition to receiving certificates of acknowledgement, over $1,200 was given to the winners (see pages xii-xiii). These were your registration fee dollars.

In closing, let me extend appreciation to the agency administrators who not only endorsed and co-sponsored this event, but also allowed their employees time to attend. As well, a hearty thanks goes out to all of the participants whose presence made the conference what it was, the proceeding's authors who convincingly substantiate its happening, and to the staff who made it possible—Keren Alexander, the Conference Coordinator, and her assistants (April, Art, Carla, Dawn, Dreama, and Sue). I look forward to all of us (and more) congregating at **Transition V** to be held **February 8-10, 1995**. See you then, when once again, we will come together in the spirit of Alabama's band song:

♪♫ Here we are, once again
Stronger now than we have ever been
Hand to hand, heart to heart
Now we made it through the hardest part ♫♪

Phil

TABLE OF CONTENTS

Preface iii
A *"Thank You"* from Michael Tedder xi
Outstanding Transition Performers in Alabama xiii
A Window to What the Authors Say xiv
Contributors xix
Pictures . . . . ii, ix, x, xii, 1, 4, 5, 6, 48, 50, 104, 105, 126

CEC's CAREER DEVELOPMENT AND TRANSITION: AN IMPORTANT UPDATE

A New Definition in Transition
Editor 1

A WINDOW TO ALABAMA'S COMMITMENT

Decatur's Community Transition Team in the Making
Emily Amberson 7

Anniston's School to Work Transition Program
Keith Dear, Lynne Smith, Roger Lingenfelter 10

Calhoun Community College's Project Gate
Virginia H. Smith 16

Mobile's Transition Advisory Committee
Ann Hilderbrand 20

UAB's Independent Living Skills for Transition
Cynthia W. Jackson and Kathryn Purvis 22

Alabama's IEP + LCCE
Mabrey Whetstone 25

Transition Services and Opportunities in Your Alabama Community
Beverly Lavender, Rebecca Fields, Brenda Carson, Nan Christian,
Ellen Gillespie and Linda Hames 31

Mobile's Joint IEP/ITP Meetings
Ann Hilderbrand 37

U of A's Self-advocacy for Students with Learning Disabilities
Rhett Brandt 40

Mobile's Vocational Rehabilitation Services in Transition
Ann Hilderbrand 46

FAMILIES

A "Group Action Planning" Cookbook for Families, Friends, and Professionals
Ann P. Turnbull and Rutherford Turnbull, III 51

Group Action Planning as a Strategy of Moving from Old to New Horizons in Transitional Planning (Keynote address)
Ann P. Turnbull and Rutherford Turnbull, III 55

Inclusion: One Parent's Story
Susan Statum 65

Problem Assessment of Family Involvement in Transition
Rebecca Curtis, Cheryll Glisson, and Robert Beadles 69

Parent Involvement in Transition: A Multicultural Perspective
Katherine Winchester and Phyllis Williams 77

Embracing Families in the Transition Planning Process: Perceptions and Expectations
Vivian Larkin and Jackie Echols 84

Lessons Learned Along the Bumpy Way
Mike McClanahan 87

Families in Transition: A Literature Profile 95

OTHER PAPERS ON TRANSITION

Rural-based Programs for Transition from School to Adult Life
Thomas Sherburne, Eric Rudrud, Robert Markve, and Randall Morris 106

Social Skills: Transitioning Students with Mild Learning Handicaps
Virginia Chance 114

Transition of Individuals Who are Deaf or Hard of Hearing: A Literature Profile
Linda Shumaker 121

PERSONNEL PREPARATION IN TRANSITION IN ALABAMA

Auburn's Master's Program in Special Education with an Emphasis in Secondary Education and Transition
Caroline Dunn 127

Auburn's Undergraduate Rehabilitation Program with an Emphasis in Job Coaching
Clarence Brown 130

Distance Education in Transition: Another Auburn Training Strategy
Philip Browning, Caroline Dunn, Linda Shumaker, and Karen Rabren 132

- **CROSSWORD PUZZLE** (answers page 49) 139
- **CONFERENCE PARTICIPANTS** 140
- **AUTHOR INDEX (cumulative I, II, III, IV)** 152
- **SUBJECT INDEX (cumulative I, II, III, IV)** 154
- **AUBURN MATERIALS ON TRANSITION (Order Form)** 165

PICTURES PICTURES PICTURES

ii, ix, x, xii, 1, 4, 5, 6, 48, 50, 104, 105, 126

Did your number win?

BEST COPY AVAILABLE

A "*Thank You*" from Michael

"To start off, I would like to say what a wonderful learning experience it was to be a part of the Transition Special Education Conference Meeting. I also learnt just how much those teachers and others want to help students like myself. Without their concern many of us would not be where we are today.

The day I heard I had been asked to speak at the conference I was so excited. The first thing I wanted to know was could I sing too. My Mom told me I would have to call myself to find out that answer. When I did, I was told to send a cassette tape with some songs that I might want to sing and they would listen to them and let me know. I was so excited when I finally got the "ok" call. My music is a big part of my life and very important to me. When I heard I could speak and sing I was on "cloud nine"; As I began working on my speech, I felt what an honor it was to be chosen for this as there are so many students in Alabama, but yet they asked me. I worked very hard and many hours to prepare for the opportunity of a lifetime. I wanted to do my best. If you'll remember my motto: ***"If you spend your time working on your abilities, your disabilities became unimportant."*** *I feel I have a strong ability to speak and sing and I enjoy doing it.*

When we arrived at the hotel the day of the conference I was amazed at how big the place was. I began to wonder if all those people standing around would be there that night to hear me. I had never spoken to that many people at one time, but I knew I could do it.

When we arrived at the conference room that night it was beginning to become packed, but I was not nervous. In fact, I was looking forward to it. This was another "great" achievement for me in my life. I hoped by speaking to these Special Education Teachers and others that I could share what the Lord and Special Education has done for me. I started to school with just a few sounds and now I am making speeches to hundreds of people about Special Education and Special Olympics. With my speaking, I hope to open many doors for other students like myself. There were also some teachers there that night that had worked so very hard to teach me and I wanted them to know they had not failed. I wanted them to know how important they are to me and every other Special Education student. I hope they continue to carry on the Transition of Special Education so that others can also benefit from it.

I enjoyed the conference that night, especially the food and the chance to give out the door prizes. Thank you Dr. Browning for giving me that great opportunity."

Michael Tedder

BEST COPY AVAILABLE

1994
OUTSTANDING PERFORMERS AWARDED at TRANSITION IV

One of the highlights of Transition IV was the awards for Alabama's *"Outstanding"* performers in transition (see facing page). Seven secondary students with disabilities from around the state were acknowledged for their *outstanding performance* in transition and were awarded $100 each. In addition, five businesses were acknowledged for their *outstanding employment role* with secondary students. Each of them works closely with the local public high schools in providing their work setting as a community-based site for training students for future employment. Finally, $500.00 was awarded to the state's *outstanding transition program.*

CONGRATULATIONS

- **OUTSTANDING STUDENTS**

  Charles Armbrust of Talladega High School
  Lisa Jean Dees of Vigor High School
  Dwight Gamble of Opelika High School
  Sharon Hall of Jess Lanier High School
  Patrick Haynes of Cullman County Child Development Center
  Marie Wilt of Auburn High School
  Kim Witherington of Fairhope High School

- **OUTSTANDING EMPLOYERS**

  Holiday Inns of Mobile
  Pasquale's Pizza in Decatur
  Niffer's Place in Auburn
  McDonalds of Opelika
  Marriott's Grand Hotel of Mobile

- **OUTSTANDING TRANSITION PROGRAM**

  Baldwin County Transition Team

A WINDOW TO WHAT THEY SAY

A *"Thank You"* from 1994's special guest-- Michael Tedder	"To start off, I would like to say what a wonderful learning experience it was to be a part of the Transition Special Education Conference Meeting. I also learnt just how much those teachers and others want to help students like myself. Without their concern many of us would not be where we are today." **Michael Tedder** (page xi)

1994 AWARD WINNERS (pages xii-xiii)

CEC's "New" Transition Definition	"The new position is (among other things) that students should be the primary architects of their own travels to the "fullest" extent of their "capability" . . . A second noticeable difference is the fact that Halpern's outcomes are more consumer oriented in a variety of action roles (**participating**, **maintaining**, **becoming**, **experiencing**, and **interacting** with others). These verbs signify that transition success is to be earmarked by the consumer's involvement in their process of assuming adult roles." **Editor** (pages 1-3)

ALABAMA'S COMMITMENT

Decatur's Transition Team Building	"The progress of Decatur's transition team reflects the willingness and dedication of the members who desire to see improvement in the transition of special students from school to our community." **Emily Amberson** (pages 7-9)
Anniston High's Transition Program	"Coordination between the Vocational Rehabilitation Service and Vocational and Special Education Departments of Anniston High School led to the development of a program that is successfully meeting the needs of a select population of students." **Keith Dear, Lynne Smith, Roger Lingenfelter** (pages 10-15)
Calhoun Community College's Transition Project	"Project GATE offers services to enhance employment-related experiences of students and training in the accessibility needs of individuals with disabilities . . . Closed-captioned videos, training manuals, and brochures developed by Project GATE are available to school systems, postsecondary institutions, disability-related organizations, and other interested groups." **Virginia Smith** (pages 16-19)

Mobile County's Transition Advisory Committee	"The Mobile County Transition Advisory Committee is an organization group that serves as a sounding board for policies, procedures, innovations, and ideas. The organization provides a link between the community and the schools, and offers an avenue to gaining community support." **Ann Hilderbrand** (pages 20-21)
UAB's Transition Independent Living Program	"UAB's Horizons Program is a two-year, post-secondary program for adults with moderate to severe learning disabilities which focuses on the transition to independent living in a college-based, nondegree program. It is the fifth of its kind in the United States and the only program in the southeast." **Cynthia W. Jackson and Kathryn Purvis** (pages 22-24)
Alabama's "New" IEP/LCCE Form	". . . efforts have been made by Alabama's Division of Special Education Services to encourage the use of the Life Centered Career Education (LCCE) Curriculum. To assist teachers in fulfilling the transition and IEP requirements, a Goals and Objectives Form incorporating LCCE curriculum has been developed." **Mabrey Whetstone** (pages 25-30)
Alabama's Community Agencies for Transition Services	"Special education teachers are encouraged to develop a 'community transition services file' which relates to the needs of the students with disabilities whom they serve. The following reviews hopefully will be the beginning of such a file for special education teachers, counselors, and the like in your area." **Beverly Lavender** (page 31)
Vocational Rehabilitation	"We (vocational rehabilitation) attempt to focus our attention on those students who may be struggling to survive in the academic environment, at a higher risk for dropping out of school, or who may be causing problems at school, home, community, or with the court system." **Rebecca S. Fields** (pages 32-33)
Birmingham's "Choice Access" Project	"United Cerebral Palsy of Greater Birmingham is conducting a multiple-site National "Choice" Demonstration Project which will provide a system of supports and services guided by individual choices and preferences of the customers--people with disabilities." **Brenda Carson** (page 33)
Calhoun County's "Stepping-Out" Program	"The Arc of Calhoun County, with offices in Anniston, is an advocacy group for approximately three thousand children and adults with mental retardation. One area in which we have been active is social and recreational development for persons with disabilities. Beginning in 1978, with a once-a-month recreational program for adults called *Stepping Out* . . . " **Nan Christian** (page 34)

MH/MR's Community Living Alternatives	"The mission of Region V is to support consumers and families in "choosing" homes, jobs, and support services of the highest quality, and in living as valued members of the community." **Ellen Gillepsie** (page 35)
Lakeshore's SLD Transition Project	"The purpose of the SLD Project at Lakeshore is to develop, implement, and evaluate a model program for adolescents and adults with specific learning disabilities using a rehabilitation facility as a base of operation." **Linda Hames** (pages 35-36)
Mobile's IEP/ITP Planning System	"Each year in Mobile County Public Schools, special education teachers, vocational rehabilitation counselors, and vocational education staff members participate in more than 600 joint IEP meetings." **Ann Hilderbrand** (page 37-39)
U of A's Self-Advocacy	"Self-advocacy is vital to any college student with a learning disability. It sets up a link between what the student knows about self and the outside world." **Rhett Brandt** (page 40-45)
FAMILY INVOLVEMENT	
A Cookbook on the "How's" of Group Action Planning	Addresses the components of GAP, including the "how" of (a) inviting support, (b) creating connections, (c) sharing great expectations, (d) solving problems, and (e) celebrating. **Ann and Rud Turnbull** (pages 51-54).
TRANSITION IV KEYNOTE **A "Living" Example of** **Group Action Planning for** **Families Friends Professionals**	"After months of intensive advocacy in trying to work with the adult agency--the only one in town that serves adults with disabilities--we faced the inevitable. We withdrew him from the program just as the administrators were ready to expel him. We made this decision with a determination to create a service model in our community that was characterized by interdependence, empowerment, and productivity." "We really had no choice but to devise a radically different approach to transition planning . . . We started out very informally, but over the years we evolved into using a process that we now call *Group Action Planning*. Group Action Planning occurs when family members, friends, and professionals create a reliable alliance with each other for the purpose of creating a different vision about what life can be when one has a disability--a vision characterized by full citizenship." "There are typically too few opportunities in transitional planning for fun and for poignant renewal of commitment, and therefore, the aspect of celebration is a critical component." **Ann and Rud Turnbull** (pages 55-64)

A Parent' Story about Inclusion	"There is a hitherto unknowledged place in the world for our children and we need to claim it. The current movement toward full inclusion gives us a hope that no other generation of parents of children with disabilities has had; the hope that when our children are grown they will be accepted as full members of the human community. We are luckier than we thought." **Susan Statum** (pages 65-68)
Problems Involving Families in Transition	"It was noted that while professionals perceived many parents as lacking in education or knowledge that could help their child, few professionals could say that they (or their program) offered parent training." **Rebecca Curtis, Cheryll Glisson, and Robert Beadles** (pages 69-762)
Culturally Diverse Families in Transition	"When working with culturally diverse individuals in transition, the role of special education includes being sensitive to the way in which specific cultural groups and individual families view disabilities." **Katherine Winchester and Phyllis Williams** (pages 73-79)
Parent Involvement	"After students leave high school, it is up to the parents to ensure that they obtain needed services. Thus, parental involvement in transition planning is essential." **Vivian Larkin and Jackie Echols** (pages 84-86)
Ten Lessons from a Legal Guardian	"The story of our relationship began in 1979 . . . At that time, I was a vocational evaluator and program manager at Goodwill Industries, and Lynn Norris was a new client. His disability diagnoses was paranoid schizophrenic, mentally retarded, cerebral palsy, partial deafness." **Mike McClanahan** (pages 87-94)
A Literature Profile on Family Involvement	Over 40 annotated references on family involvement in transition were compiled by students enrolled in Dr. Clarence Brown's advanced transition course. (pages 95-103)
OTHER TRANSITION PAPERS	
Exemplary Transition Programs in Rural Areas	"To overcome the rural constraints on employment of students with disabilities, BHSSC developed an Entrepreneurial Model of Supported Employment to enhance employment of their students. This model had to provide meaningful, socially valued work in integrated settings, while overcoming transportation issues and a limited number and variety of jobs available to students in rural areas." **Tom Sherburn, Eric Rudrud, Bob Markve and Randell Morris** (pages 106-113)

Social Skills Training	"The student with a deficit in social skills needs conscious effort and specific teaching to learn about the social world, its nuances, and its silent language. Students with social disabilities appear to be unable to make appropriate responses in social situations without direct teaching. Social skills training has an important place in the curriculum of these students." **Virginia Chance** (pages 114-120)
A Literature Profile on the Deaf and Hard of Hearing	The author provides an annotation of 17 references pertaining specifically to the transition of individuals who are deaf and hard of hearing. **Linda Shumaker** (pages 121-125).

TRAINING TRANSITION PERSONNEL

Auburn's Master's Level Secondary Transition Program	"The goal of this preparation grant is to impact Alabama's secondary special education programs. Our purpose is to improve the quality and increase the quantity of **secondary teachers** serving students with mental retardation, learning disabilities, or behavior disorders. At the conclusion of this five year project, 40 (plus) teachers will have been "well trained" in transition." **Caroline Dunn** (pages 127-129)
Auburn's Undergraduate Rehabilitation Program "Job Coach"	"An innovative program feature is that the students' financial assistance is directly linked to their field-based experience. Specifically, following their two academic practicum quarters, each student is paid hourly wages to serve as a **job coach** for up to 400 hours. The result is that the immediate and surrounding community will have up to 35 part-time job coaches a year." **Clarence Brown** (pages 130-131)
Auburn's Distance Education for Alabama's Transition Stakeholders	"This paper describes this newly funded three-year training project to be developed and implemented throughout the state (and nation). The support for and interest in it is based on the results of a statewide survey with Alabama's transition stakeholders. **Phil Browning, Caroline Dunn, Linda Shumaker, and Karen Rabren** (pages 132-138)

PICTURES
PICTURES
PICTURES

II, IX, X, XII, 1, 4, 5, 6, 48, 50, 104, 105, 126

CONTRIBUTORS

Emily Amberson, Coordinator
Transition Program
Decatur Public Schools
110 Johnston Street
Decatur, AL 35601

Robert Beadles, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

Rhett Brandt, Career Counselor
LD Career Project
The University of Alabama
Box 870304
Tuscaloosa, AL 35487-0304

Clarence Brown, Program Director
Undergraduate Rehabilitation
Rehabilitation & Special Education
Auburn University, AL 36849

Philip Browning, Head
Rehabilitation & Special Education
Auburn University, AL 36849

Brenda Carson, Employment Specialist
United Cerebral Palsy
2430 11th Ave., North
Birmingham, AL 35234

Virginia Chance, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

Nan T. Christian, Director
The Arc of Calhoun County
20 West 14th St.
Anniston, AL 36201

Rebecca Curtis, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

Keith Dear, Counselor
Vocational Rehabilitation
Anniston High School
1105 Woodstock Avenue
Anniston, AL 36201

Caroline Dunn, Program Director
Secondary Education and Transition
Rehabilitation & Special Education
Auburn University, AL 36849

Jackie Echols, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

Rebecca Fields, Transition Specialist
Division of Rehabilitation Services
2419 Gordon Smith Dr.
Mobile, AL 36617

Ellen B. Gillespie, Regional V Director
Mental Health/Mental Retardation
91 Black Creek Road
Tarrant, AL 35217

Cheryll Glisson, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

Linda Hames, Director
Specific Learning Disabilities Project
Lakeshore Rehabilitation Facility
3830 Ridgeway Drive
Homewood, AL 35259

Ann Hilderbrand, Consulting Teacher
Mobile County Public School
P.O. Box 1327
Mobile, AL 36633-1327

Cynthia W. Jackson, Instructor
UAB Horizons Program
157 Education Bldg.
901 S. 13th St.
Birmingham, AL 35294-1250

Vivian Larkin, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

Beverly Lavender, Coordinator
Transition Program
Jefferson County Schools
801 6th Ave., South
Birmingham, AL 35233

Roger Lingenfelter
JTPA Job Coach
Anniston High School
1105 Woodstock Avenue
Anniston, AL 36201

Michael McClanahan
Rehabilitation Consultant
112 Reese Ave.
Auburn, AL 36830

Bob Markve, BHSSC
P. O. Box 218
Sturgis, S.D. 57785

Randell Morris, BHSSC
P. O. Box 218
Sturgis, S. D. 57785

Karen Rabren, Learning Clinic
Rehabilitation & Special Education
Auburn University, AL 36849

Eric Rudrud, Faculty
Department of Applied Psychology
St. Cloud State University
St. Cloud, MN 56301

Tom Sherburne, Instructor
Department of Psychology
Auburn University, AL 36849

Linda Shumaker, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

Lynne Smith, Coordinator
Special Populations
Anniston High School
1105 Woodstock Avenue
Anniston, AL 36201

Virginia H. Smith, Coordinator
Project GATE
Calhoun Community College
P.O. Box 2216
Decatur, AL 35609-2216

Susan Statum
Birmingham Resident

Michael Tedder, Secondary Student
7456 Plantation Road
Birmingham, Al 35126

Ann and Rutherford Turnbull
Co-Directors, Beach Center on Families
and Disability
C/O Life Span Institute
3111 Haworth Hall
University of Kansas
Lawrence, KS 66045

Mabrey Whetstone
Educational Specialist
Division of Special Education
Gordon Persons Building
50 N. Ripley
Montgomery, AL 36130

Phyllis Williams, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

Katherine Winchester, Doctoral Student
Rehabilitation & Special Education
Auburn University, AL 36849

TRANSITION
in
Alabama
School
Community

A NEW DEFINITION IN TRANSITION
The Position of CEC's Career Development and Transition

Editor

At Transition IV, Dr. Andrew Halpern, *Director of Secondary Special Education and Transition* Programs, University of Oregon, presented via satellite an invited position paper developed for the Council for Exceptional Children's Division of Career Development and Transition. This paper, which was subsequently adopted by the Division and now is in print, [1] provides both a conceptual and definitional foundation for transition. Presented here is a brief comparison between Dr. Halpern's (or the Division's) new definition and OSERS's definition, which is included in The Individuals with Disabilities Education Act.

"Halpern via Satellite at Transition IV"

Halpern's (or Career Development's) Definition

Transition refers to a change in status from behaving primarily as a student to assuming emergent adult roles in the community. These roles include employment, participating in post-secondary education, maintaining a home, becoming appropriately involved in the community, and experiencing satisfactory personal participation and coordination of school programs, adult agency services, and natural supports within the community. The foundations for transition should be laid during the elementary and middle school years, guided by the broad concept of career development. Transition planning should begin no later than age 14, and students should be encouraged, to the full extent of their capabilities, to assume a maximum amount of responsibility for such planning.

---

[1] Halpern, A (1994, Fall Issue). The transition of youth with disabilities to adult life: A position statement of the Division on Career Development and Transition, *Career Development for Exceptional Individuals. 17.*

OSERS's Definition

". . . a coordinated set of activities for a student, designed within an outcome-oriented process, which promotes movement from school to post-school activities, including postsecondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation. The coordinated set of activities shall be based upon the individual student's needs, taking into account the student's preferences and interests, and shall include instruction, community experiences, the development of employment and other post-school adult living objectives, and, when appropriate, acquisition of daily living skills and functional vocational evaluation" [IDEA, P.L. 101-476, 20 U.S.C. Chapter 33, Section 1401(a)(19)].

Table 1 profiles the above two definitions. Aside from their many similarities, a major qualitative difference between them is the emphasis placed upon the student as consumer. First, while both definitions call for consumer input into the development of the transition plan, Halpern's position is that students should be the primary architects of their own travels to the "fullest" extent of their "capability." In this respect, the nature of each plan differs depending upon the individual. In other words, the extent to which it is their "own" blueprint rests partly upon their capability of drafting it. Furthermore, Halpern states that the student should be "encouraged" to assume a "maximum" amount of "responsibility" for the development of their own plan.

> **The new position is that students should be the primary architects of their own travels to the "fullest" extent of their "capability." By contrast, OSERS's definition implies that someone other than the consumer is primarily responsible for determining the student's needs and developing the plan to address them.**

By contrast, OSERS's definition implies that someone other than the consumer is primarily responsible for determining the student's needs and developing the plan to address them. While those needs are to include students' **interests** and **preferences**, one senses that the students simply must be "allowed" the opportunity to provide such input into the larger design.

A second noticeable difference is the fact that Halpern's outcomes are more consumer oriented in a variety of action roles (**participating, maintaining, becoming, experiencing,** and **interacting** with others). These verbs signify that transition success is to be earmarked by the consumer's involvement in their process of assuming adult roles. Third, with respect to the transition process, Halpern's definition focuses on the consumers' "growing-up" stages from adolescents to young adulthood. By contrast, OSERS's definition refers to the transition movement as if it were a re-location from place A (school) to place B (post-school).

The emphasis on Halpern's definition is how consumers should behave in those settings; whereas, OSERS's signifies where they will reside. Finally, with reference to time-frame, Halpern includes a starting point of no later than 14 years of age. Also, he draws upon the field of Career Education and its concept of career development over time, beginning in the elementary school years. By contrast, OSERS's time frame is left to the more static vantage points of "school" to "post-school."

Table 1
A Comparison of Definitions

Criteria	OSERS 1990	Halpern 1994
Transition	movement from school to post-school	change in status from behaving primarily as a student to assuming emergent adult roles in the community
Services	• instruction • community experiences • the development of employment • other post-school adult living objectives, and when appropriate acquisition of daily living skills and functional vocational evaluation	coordination of • school programs, • adult agency services, and • natural supports within the community
Outcomes Goals	an outcome-oriented process that promotes • postsecondary education • vocational training • integrated employment (including supported employment) • continuing and adult education • adult services • independent living, or community participation	• employment • participating in post-secondary education • maintaining a home • becoming appropriately involved in the community • experiencing satisfactory personal participation successful • adult living • interacting with others • and working
Time-frame	school to post-school activities	foundations for transition should be laid during • the elementary and middle school years, • guided by the broad concept of career development. Transition planning should begin • no later then age 14
person centered	. . . activities shall be based upon the individual student's needs, taking into account the student's preferences and interests	students should be encouraged, to the full extent of their capabilities, to assume a maximum amount of responsibility for such planning

BEST COPY AVAILABLE

BEST COPY AVAILABLE

DECATUR'S COMMUNITY TRANSITION TEAM IN THE MAKING

Emily Amberson

Since September 1993, volunteers in Decatur, Alabama have actively participated in Decatur City School's first Community Transition Team. This team is based on the Community Transition Team Model developed by Andrew Halpern, Lauren Lindstrom, Michael Benz and Debra Nelson from the University of Oregon. Hopefully, many other communities will build their own transition teams to benefit students making the transition from school to the community.

The Purpose of a Transition Team

The purpose of the Community Transition Team is to discover and implement new and better ways of providing secondary special education and transition services for students so that they are more prepared to function effectively as adults in the community. The team addresses major transition issues concerning students, including (a) high unemployment and underemployment, (b) low quality of life, (c) high drop-out rates, (d) inappropriate educational programs, and (e) inadequate adult services. The philosophy of Decatur's transition team is presented below:

Philosophy of the Community Transition Team Model

Philosophy

All students with disabilities should receive appropriate services to insure that they successfully transition from school to adult roles in the community.

Principles

- **All youth with disabilities should be included.**
- **School and community programs developed as part of the project should be practical and functional.**
- **School and community programs should address all important adult roles, including occupational, independent living, and personal-social dimensions of community integration.**
- **School and community programs should strive to embody the concept of social integration.**
- **Transition teams should be multidimensional and include key members of local communities.**

Team Building

The purpose of the team building is to establish a strong group of volunteers who are interested in and committed to transition and who represent the community. Team building begins with a key person (or persons) in the community who is in a leadership role and has an interest in transition services for students with disabilities. To begin building a team, the key persons may contact agencies that need to be represented and ask each agency to select a representative to serve on the team. Another team building technique is to brainstorm together with interested persons for appropriate team members. To further develop the team, a suggested list of transition team members is considered (see listing below):

Suggested Transition Team Members

School Personnel

1. Special Education Teachers
2. Regular Education Teachers
3. Vocational Education Teachers
4. School Administration
5. Special Education Administration
6. Other (Counselor, Related Services Personnel)

Consumers

1. Parents
2. Students/School Leavers

Adult Services Personnel

1. Vocational Rehabilitation Counselor
2. Mental Health Case Manager
3. Vocational/Residential Service Provider
4. Private Industry Council Representative
5. Employment Division Representative
6. Community College Representative
7. Other (Juvenile Services, Welfare)

Community Members

1. Employers
2. Chamber of Commerce
3. Ministerial Association
4. Other (Service organizations, Newspaper)

The progress of Decatur's team reflects the willingness and dedication of the members who desire to see improvement in the transition of special education students from school to our community.

Each team is unique and should be designed with the characteristics of the community, school system, students, and volunteers in mind. Primary considerations in determining a team are (a) size and location of community, (b) number of schools and school districts to be served, and (c) balance between school personnel and non-school personnel as team members. After potential team members have been identified, they must be contacted and asked to serve as a volunteer on the team. It is very important for the person contacting the potential team member to describe and explain the philosophy and purpose of the team.

Team building begins as each person agrees to serve. Once teams are established, team building becomes an on-going process as new members are added to meet the needs of the team and other members resign. Of course, the success of the team depends on the commitment of the team members.

> ***"NEVER DOUBT THAT A SMALL***
> ***GROUP OF THOUGHTFUL,***
> ***COMMITTED CITIZENS CAN***
> ***CHANGE THE WORLD. INDEED,***
> ***IT IS THE ONLY THING THAT***
> ***EVER HAS."***
>
> Margaret Mead

An Update from Decatur

Using the Community Transition Team Model, Decatur's Transition Team now has completed the process of team building, needs assessment, and program planning. Based on the results of the needs assessment completed by our team members, we now are involved in program implementation striving to meet goals and objectives relating to employment, transportation, and residential needs as they relate to the transition process of students. In the future, we will complete the program evaluation phase of the model, which includes a review of accomplishments and a reassessment of needs leading to the development of a "new" plan of action.

Using the unique strengths of our community, open communication of needs, network of information, and a great desire for improvement, the Community Transition Team works together to ensure the successful transition of students.

The progress of Decatur's team reflects the willingness and dedication of the members who desire to see improvement in the transition of special education students from school to our community. Using the unique strengths of our community, open communication of needs, network of information, and a great desire for improvement, the Community Transition Team works together to insure the successful transition of students.

ANNISTON'S SCHOOL TO WORK TRANSITION PROGRAM

Keith Dear, Lynne Smith, Roger Lingenfelter

The transition from high school to permanent employment is a challenging task for all students. Disabled and economically disadvantaged students, in particular, face overwhelming hardships when attempting to enter today's work force. This longstanding difficulty has been addressed over the years by a variety of programs. Furthermore, there continues to be a need to assist young people in achieving successful transition.

Anniston High School (A.H.S.), a large urban school located in Anniston, Alabama, has developed many strategies for preparing students for employment. Coordination between the Vocational Rehabilitation Service and Vocational and Special Education Departments of Anniston High School led to the development of a program that is successfully meeting the needs of a select population of students. The students' exceptionalities include EMR, TMR, LD, EC, and the physically challenged.

Coordination between the vocational rehabilitation service and vocational and special education departments of Anniston High School led to the development of a program that is successfully meeting the needs of a select population of students.

The A.H.S. Work Transition Program has been funded through a **Job Training Partnership Act (JTPA)** grant obtained by state Vocational Rehabilitation Services. The "target population" meets the following criteria:

1. students who are identified as economically disadvantaged,
2. seniors or nongraded students,
3. students unable to transition from school to permanent employment through regular school programs,
4. students programmed through the IEP process to move from school setting to unsubsidized employment, and
5. students eligible for vocational rehabilitation services.

The **Certification Process** for the school-to-work program includes:

1. vocational assessment,
2. medical evaluation (when appropriate),
3. eligibility determination for vocational rehabilitation services,
4. selection of participants by JTPA Transition Committee (made up of vocational rehabilitation, special education teachers, principal, vocational director, special populations coordinator, remediation teacher, counselors, central office special education director and Job Coach),
5. parent/guardian counseling,
6. self-help and community skills,

7. career exploration and pre-employment skills training,
8. job related basic competency remediation,
9. job development, placement, assessment, coaching, and other services to assure successful employment, and
10. follow-up services by the vocational rehabilitation counselor and job coach.

Anniston's Two Primary Success Factors

The **Transition Committee** and the **Job Coach** have been identified as primary factors in the success of Anniston High School's School-to-Work Program. Each of these elements is discussed briefly.

The Transition Committee

The Transition Committee meets on a monthly basis to make new referrals to the program, monitor participants' progress, and refine policies and procedures governing the program. Meetings are held during the school day. Fortunately, we have found a period/hour when only three of the Committee members have class assignments. As such, they attend the meetings on a rotating basis.

The primary objective of the transition team meetings is to provide a communication opportunity for the personnel who serve this population of students. Each Committee member is an advocate for students' success. Teachers are given the opportunity to refer students to the program and they frequently share background information with the job coach, which enables him to be most effective in working with the student. Teachers share their knowledge of potential student problems, such as transportation, home life, past job performance, coping skills, and the like. Teachers also give the job coach information about student strengths (e.g., certification process, job successes, and job failures).

Job Coach

The Job Coach works with a student beginning with the initial certification process through job interview and orientation, and actually works side-by-side with the student, gradually "fading" from the job site as the worker becomes proficient. The concept of a job coach has been well received by area businesses employing Anniston High School students.

Roger Lingenfelter, A.H.S. Job Coach, approaches his job with considerable optimism and flexibility. He is persistent in making a good job match with each student, and secures a support system for the student at the job site. School personnel are encouraged by Roger's straightforward approach to assisting their students in securing permanent employment.

Our Program Guidelines

The following are guidelines unique to the Anniston High School program. These are offered here for the potential user's consideration.

1

STUDENTS CURRENTLY ENROLLED AND ATTENDING CLASSES AT AHS

(will NOT report to AHS campus, full-time employment).

1. Job coach will contact attendance clerk so she can notify homeroom teacher and other teachers, as needed, while student interviews, leaves campus as necessary for certification process, etc.

2. Job coach will begin JTPA certification process:

   a. Verification of all benefits student and/or family is/are receiving from state or federal sources.

   b. Student accompanies job coach to Employment Service offices to complete forms and necessary paperwork.

   c. Student accompanies job coach to Assessment Center to verify JTPA Certification.

3. Student and job coach begin interview process.

4. Job coach informs attendance clerk when date and place of employment for the student is finalized.

5. Job coach contacts PEY teacher (responsible for IEP) when date and place of employment for the student are finalized.

6. IEP (modification) process will be completed in a timely fashion with the appropriate parties.

7. PEY teacher in charge of IEP meeting will fill out schedule change request form and indicate student's plans for graduation exam and graduation ceremonies and submit to Coordinator of Counseling.

   Coordinator of Counseling will notify any additional counselors as necessary.

8. Job coach will complete the coaching and fading process as necessary - usually less than 30 days.

9. Job coach will complete Termination Report.

10. Vocational rehabilitation counselor will follow up on client for 60 days after job coach terminates client's transition program. If student is pursuing Graduation Certificate or Diploma, VR counselor will follow up until date of graduation ceremonies. Students are eligible for postemployment services (job placement, remedial training, etc.) and may request services again after case closure.

II

STUDENTS CURRENTLY ENROLLED AND ATTENDING CLASSES AT AHS

(will report to AHS campus, part-time employment)

1. Job coach will contact students' counselor to determine possible hours for employment.

2. Job coach will contact attendance clerk so she can notify homeroom teacher and other teachers, as needed, while student interviews, leaves campus as necessary for certification program.

3. Job coach will begin JTPA certification process:

    a. Verification of all benefits student and/or family is/are receiving from state or federal sources.

    b. Student accompanies job coach to Employment Service offices to complete forms and necessary paperwork.

    c. Student accompanies job coach to Assessment Center to verify JTPA Certification.

4. Student and job coach begin interview process.

5. Job coach contacts PEY teacher (responsible for IEP) when date and place of employment for the student are finalized.

6. IEP (modification) process will be completed in a timely fashion with the appropriate parties.

7. PEY teacher in charge of IEP meeting will fill out schedule change request form and indicate student's plans for graduation exam and graduation ceremonies and submit to Coordinator of Counseling.

    Coordinator of Counseling will notify any additional counselors as necessary.

8. Job coach will complete the coaching and fading process as necessary - usually less than 30 days.

9. Job coach will complete Termination Report.

10. Vocational rehabilitation counselor will follow up on client for 60 days after job coach terminates client's transition program. If student is pursuing Graduation Certificate or Diploma, VR counselor will follow up until date of graduation ceremonies. Students are eligible for postemployment services (job placement, remedial training, etc.) and may request services again after case closure.

III
STUDENTS NOT CURRENTLY ENROLLED OR ATTENDING CLASSES AT AHS
(will NOT report to AHS campus, full-time employment)

1. Job coach will assist student in enrolling at AHS through Mrs. Ward's office. Student will fill out *Registration Form*.

2. Job coach will begin JTPA certification process:

    a. Verification of all benefits student and/or family is/are receiving from state or federal sources.

    b. Student accompanies job coach to Employment Service offices to complete forms and necessary paperwork.

    c. Student accompanies job coach to Assessment Center to verify JTPA Certification.

3. Student and job coach begin interview process.

4. Job coach informs attendance clerk when date and place of employment for the student are finalized.

5. Job coach contacts PEY teacher (responsible for IEP) when date and place of employment for the student are finalized.

6. IEP (modification) process will be completed in a timely fashion with the appropriate parties.

7. PEY teacher in charge of IEP meeting will fill out schedule change request form and indicate student's plans for graduation exam and graduation ceremonies and submit to Coordinator of Counseling.

    Coordinator of Counseling will notify any additional counselors as necessary.

8. Job coach will complete the coaching and fading process as necessary - usually less than 30 days.

9. Job coach will complete Termination Report.

10. Vocational rehabilitation counselor will follow up on client for 60 days after job coach terminates client's transition program. If student is pursuing Graduation Certificate or Diploma, VR counselor will follow up until date of graduation ceremonies. Students are eligible for postemployment services (job placement, remedial training, etc.) and may request services again after case closure.

IV

TMR STUDENTS CURRENTLY ENROLLED AND ATTENDING CLASSES AT AHS

(will NOT report to AHS campus, full-time employment)

1. Job coach will contact TMR teacher to coordinate schedule changes.

2. Job coach will begin JTPA certification process:

    a. Verification of all benefits student and/or family is/are receiving from state or federal sources.

    b. Student accompanies job coach to Employment Service offices to complete forms and necessary paperwork.

    c. Student accompanies job coach to Assessment Center to verify JTPA Certification.

3. Student and job coach begin interview process.

4. Job coach informs TMR teacher when date and place of employment for the student are finalized.

5. IEP (modification) process will be completed in a timely fashion with the appropriate parties.

6. TMR teacher will fill out schedule change request form and notify Coordinator of Counseling in regard to student's plans for graduation ceremonies.

    Coordinator of Counseling will notify any additional counselors as necessary.

7. Job coach will complete the coaching and fading process as necessary - usually less than 30 days.

8. Job coach will complete Termination Report.

9. Vocational rehabilitation counselor will follow up on client for 60 days after job coach terminates client's transition program. If student is pursuing Graduation Certificate or Diploma, VR counselor will follow up until date of graduation ceremonies. Students are eligible for postemployment services (job placement, remedial training, etc.) and may request services again after case closure.

CALHOUN COMMUNITY COLLEGE'S PROJECT GATE[1]

Gaining Access: Transition to Employment

Virginia H. Smith

According to the 1990 census, four million people in the United States report having work disabilities. In Alabama, 244,826 people of prime working age (16-24) were classified with work disabilities. In a 1992 issue of *Graduating Engineer*, Steven Ross reported that general unemployment among people with disabilities is estimated at over 50%. Ross went on to say that the majority of those individuals with disabilities who are employed also are severely under-employed.

A study of the vocational status of adults with learning disabilities was conducted by Hoffman in 1987. Of 381 subjects, only 36 were employed. Those who were employed were employed for an average of 31 hours per week. Problems in employment related by these subjects included (a) difficulty filling out job applications, (b) knowing where to find a job, (c) knowing how to get job training, (d) following directions, and (e) problems with daily living skills (including handling money and time management).

Project GATE offers services to enhance employment-related experiences of students and training in the accessibility needs of individuals with disabilities. Cooperative arrangements with service providers, government agencies, disability-related groups, and business/industry representatives strengthen the network of resources to facilitate the career placement opportunities of college students with disabilities.

Often individuals with disabilities are at a significant disadvantage in obtaining employment, because they lack the work experiences their peers obtained through odd jobs, summer employment, and even volunteer experience. Even when employment is obtained, it is often not stable. Blalock and Dixon (1982) report that adults with learning disabilities report a history of frequent job changes "*because things just didn't work out*."

Since the implementation of P.L. 94-142, there has been emphasis on individualized education of students with disabilities. Despite gains in access to education, adults with disabilities report continuing problems which impact upon employability (Horn, O'Donnel, & Vituliano, 1983). Marth (1981) says, "*education is important, but so is employability*."

Even though there have been significant gains--more appropriate services in secondary schools and transition assistance to postsecondary schools--education must do a better job of preparing individuals with disabilities for life after school (Tomlan & Michaels, 1990). Successful job placement should complete the continuum of services.

---

[1] Project GATE (Gaining Access: Transition to Employment) is a grant (#H078C30016) funded through the Office of Special Education and Rehabilitative Services, U.S. Department of Education.

Tritell (1988) also reported on a lack of emphasis in education on employment preparation for individuals with disabilities. He cited a Harris Poll of more than 900 employers, which stated that a lack of qualified applicants accounts for a lack of hiring of people with disabilities.

In a 1982 ACLD (now LDA) study of 562 adults with learning disabilities, the need for career counseling was ranked second out of 10 needs. Anticipated changes in employment patterns make the need for adequate career planning even more important. *"Workforce 2000: Work and Workers for the 21st Century"* (1989) indicates that jobs in the future will require increased levels of skill and flexibility. Higher standards for successful employment could place disabled individuals at an even greater disadvantage than they are today.

Johnston and Packer (1987) predict that many low-skilled jobs will disappear by the year 2000. They also project that three-fourths of the jobs will require some education or technical training beyond high school. However, they state that, *"80% of all jobs will not require a college degree."* Community colleges, working collaboratively with industry and other service providers, are ideally suited to prepare individuals with disabilities to compete successfully for jobs into the year 2000 and beyond.

Five skills are fundamental to successful movement from the postsecondary environment to competitive employment (Tomlan & Michaels, 1990). These skills are as follows:

- **self-advocacy**
- **listening comprehension**
- **memory**
- **organization**
- **proactive skills**

Tomlan and Michaels (1990) indicate that (a) service providers must begin to work collaboratively with the college career/job placement office, state and local Vocational Rehabilitation offices, and with local business and industry; and (b) service providers must establish contact and work with local disability related non-profit organizations.

Project GATE

John C. Calhoun State Community College sought and received funding for a three-year model program to enhance the ability of its existing Career Planning and Job Placement Center to assist students with disabilities in the transition from college to employment. Project GATE (Gaining Access: Transition to Employment) is a model postsecondary career placement project designed to assist students with disabilities in the transition from college to work. Housed in the Career Planning and Job Placement Center of Calhoun Community College, Project GATE offers services to enhance employment experiences of students and training in the accessibility needs of individuals with disabilities. Cooperative arrangements with service providers, government agencies, disability groups, and business/industry representatives strengthen the network of resources to facilitate the career placement opportunities of college students with disabilities.

Career Experiences for Students

Project GATE opens new opportunities for career experiences for Calhoun students with disabilities. Monthly "Job Club" programs, job-search seminars, and workshops offer (a) career exploration, (b) interviewing and job-seeking skills, (c) self-advocacy development, and (d) training in topics such as time management, organizational skills, and on-the-job behavior.

Group visits to business/industry and shadowing opportunities provide students with a first-hand look at various careers. Potential employers visit the campus for pre-employment interviews leading to potential part-time and full-time employment. Employers also volunteer their time to meet and talk with groups of students on campus.

Closed-captioned videos, training manuals, and brochures developed by Project GATE are available to school systems, postsecondary institutions, disability-related organizations, and other interested groups.

Calhoun's annual **Career Information Fair** brings approximately 40 representatives of business, industry, and government to interact with students and to share information on a wide range of occupations. A hands-on display demonstration of assistive technology gives employers, students, and school personnel information on the latest developments in equipment and software for program and on-the-job accommodations.

Training and Technical Assistance

Project GATE opens the way for training and technical assistance on programs and work accessibility and accommodations. Project GATE and college staff are available to provide information and training to personnel of postsecondary and secondary educational programs (and other groups). Training and technical assistance topics may include:

- **General orientation to disabilities**
- **Requirements of the Americans with Disabilities Act (ADA) and Section 504**
- **Available programs and services for individuals with disabilities**
- **Disability etiquette**
- **Nondiscrimination in employment and/or education**
- **Most effective use of postsecondary Career Planning and Job Placement for students with disabilities**
- **Career choices, job readiness and placement, job-keeping skills**

Closed-captioned videos, training manuals, and brochures developed by Project GATE are available to school systems, postsecondary institutions, disability-related organizations, and other interested groups.

The Project GATE Advisory Board is active in planning, implementing, evaluating, and disseminating this program. The 20-member Board includes representatives from the Alabama Division of Vocational Rehabilitation Services; Alabama Employment Office; Governor's Committee on Employment of Persons with Disabilities; Career Planning and Job Placement Offices; Morgan County Economic Development

Association; U.S. Office of Personnel Management; FAST, Inc.; Alabama Institute for Deaf and Blind; U.S. Space and Rocket Center; Tech Prep; and students/consumers with disabilities.

References

Blalock, G., & Dixon, N. (1982). Improving prospects for college-bound learning disabled. *Topics in Learning and Learning Disabilities*. 67-78.

Hoffman, F., Sheldon, K., Minskoff, E., Saulter, S., Steidle, E., Baker, D., Bailey, M., & Echols, L. (1987). Needs of learning disabled adults. *Journal of Learning Disabilities. 20*(1), 43-47.

Horn, W., O'Donnell, J., & Vituliano, L. (1983). Long-term follow-up studies of learning disabled persons. *Journal of Learning Disabilities. 16*, 542-555.

Johnston, W., & Packer, A. (1987). *Workforce 2000: Work and workers for the twenty-first century*. Indianapolis, IN: Hudson Institute.

Marth, D. (1981 December). Campus job/shuttles to careers. *Nations's business merchandising your job talents*. State of California Health and Welfare Agency. 17-21.

Ross, S. (1992, December). High-tech mainstreaming. *Graduating Engineer*. 47-60.

Tomlan, P., & Michaels, C. (1990). Integrating persons with learning disabilities into the workplace. *In tune with the future. Selected proceedings of the 1990 AHSSPPE Conference.*

Tritell, A. (1988). The next transition: Learning disability and employment. *From high school to college: Keys to success for students with learning disabilities*. 69-77.

U.S. Department of Labor, Bureau of Labor Statistics. (1987). *Occupational Outlook Quarterly*.

MOBILE'S TRANSITION ADVISORY COMMITTEE

Ann Hilderbrand

When the transition grant for Mobile County was written, one of the goals was to improve collaboration between special education, vocational education, and community agencies. To reach this goal, one objective was to establish a Transition Advisory Committee involving schools, support agencies, the business community, students, and parents. Because of other activities connected with getting the Work Instruction Program going, this objective was pushed to the back burner, even though the special education staff increased their contact with the agency representatives, vocational education staff, and business people.

> **The Mobile County Transition Advisory Committee is an organization group that serves as a sounding board for policies, procedures, innovations, and ideas. The organization provides a link between the community and the schools, and offers an avenue to gaining community support.**

The special education staff conferred with and sought advice of individuals representing the different areas. Many times, staff from the different areas presented at special education inservice programs and participated in planning committees. We all enjoyed informal interaction. It was not until last year, however, that a group of representatives were asked to serve on an official Transition Advisory Committee.

The Mobile County Transition Advisory Committee is an organization group that serves as a sounding board for policies, procedures, innovations, and ideas. The members make non-binding suggestions in an effort to improve the quality of the transition programs and services. The organization also provides a link between the community and the schools, and offers an avenue to gaining community support.

The Transition Advisory Committee is composed of people who share a concern for students with disabilities. When Ann Hilberbrand, Special Education Consulting Teacher, and Rebecca Fields, the Vocational Rehabilitation Transition Supervisor, made plans to organize the committee, they invited:

- **a parent**
- **a student**
- **a principal of an Area Vocational Center**
- **a principal of a high school participating in the Work Instruction Program**
- **a facilitator of a Work Instruction Program**
- **a Community-Based Work Instruction teacher**
- **a Special Needs Population Coordinator**
- **a Community Special Events Manager**
- **a counselor from Bishop State Community College**
- **a Mental Health/Mental Retardation representative**
- **a JTPA representative from the Division of Instruction**
- **the Director of Employment Services - United Cerebral Palsy**
- **the Supported Living Unit Director from the Volunteers of America South Alabama**
- **two businessmen**

A conscious effort was made to identify members that had experience, enthusiasm, and open-mindedness, as well as their willingness and ability to commit time to committee meetings and activities. Also, gender and racial balance was considered. Although the membership seems large, the average attendance is 12, a size that allows active participation. We plan to increase the number of parents and students on the Committee to insure their participation.

Some of the activities of the Advisory Committee have included: (a) participating in organizational activities to share information about themselves; (b) compiling a membership list that contained name, title, address, phone number, and duties for distribution; (c) identifying strengths and discussing concerns of the Functional Curriculum before it was presented to the School Board for consideration; and (d) developing a community transition services information list for special education teachers to use when writing transition objectives for the IEP.

The Committee has asked for information concerning "inclusion," and this will be shared at the next meeting. Future plans include developing and disseminating an assessment instrument to identify the information base of parents, students, and secondary special education teachers concerning school and community transition services. This then can be used to expand the transition services information list in a manual. In summary, these activities and informal contacts between Committee members and school personnel has resulted in a good working relationship. We all feel free to call on each other for help or information.

UAB'S INDEPENDENT LIVING SKILLS FOR TRANSITION

Cynthia W. Jackson and Kathryn Purvis

Many adult human service agencies are facing a dilemma of proportions that have not been seen before. This is a result of the many young men and women with learning disabilities who are moving beyond the scope of P.L. 94-142 (now IDEA) and into the process of transition. The responsibility of managing this transition process falls into the hands of a variety of persons, including educators, administrators, parents, the person with a disability, adult service agencies, and employers (Berkell & Brown, 1989). However, this responsibility largely falls into the hands of educators who develop and maintain transition programs.

In response to the surge of students exiting high school, and as a result of the transition initiative, over 180 model transition demonstration projects were established nationwide between 1984 and 1989. These projects have served more than 18,877 persons with diverse disabilities. More than half of the individuals served by these projects were identified as learning disabled (Lundstram & Politiek-Haim, 1990).

As a result of the dilemma posed by these exiting learning disabled students, the University of Alabama in Birmingham (UAB), with a solid foundation of community leadership and involvement, established the Horizons Program in 1991 under the directorship of Dr. Jade Carter. UAB's Horizons Program is a two-year, post-secondary program for adults with moderate to severe learning disabilities, which focuses on the transition to independent living in a college-based, nondegree program. It is the fifth of its kind in the United States and the only program in the southeast. The UAB setting is unique in that the nondegree curriculum is offered on a metropolitan campus that also houses a medical and dental school.

UAB'S Horizons Program is a two-year, post-secondary program for adults with moderate to severe learning disabilities which focuses on the transition to independent living in a college-based, nondegree program. It is the fifth of its kind in the United States and the only program in the southeast.

In 1992, the first students arrived and enjoyed great success in their first year. In the second year, the program tripled in size and scope. Subject matter courses now are focused on three main areas of education: (a) social skills, (b) life skills, and (c) career orientation. All subject matter is designed to assist the student in making the transition from life at home, or boarding school to independence in living, working, and social activities. No one area is emphasized above another, as all are necessary in proper balance to achieve the independent adult.

The curriculum is designed to establish a self-determined and self-actualized student, and its objectives are met in the lives of the students through practical experiences. A balance is established between these objectives for each individual student according to individual abilities, interests, and involvement with peers and the community. According to Halpern (1985), "*In determining success, it is important to consider: (a) an individual's achievement of certain accomplishments that are both societally accepted and expected for a particular developmental period; (b) an individual's perception of himself or herself as doing well, as being satisfied with his or her current life situation; and (c) the match between an* *individual's current activities, accomplishments, relationships, and experiences and his or her self-perceptions and aspirations"* (p.460).

Each course for a Horizons student is carefully structured to encompass all issues of relevance. Each skill is essential to the ultimate success of the student and is carefully integrated into the general curriculum. The "social skills" courses examine such issues as cooperation, eye contact, self-esteem, conflict management, stress management, interpersonal relations, and social competence to promote the maturity and self-reliance of the individual.

The Life Skills Curriculum involves internalizing such skills as personal hygiene, appropriate appearance, domestic management, human sexuality, transportation, writing, financial management, and apartment living. The internalization of these skills is supported by seminars, or "roundtables," devoted to topics such as dorm management, conflict resolution, and safety on campus. Students further their leadership skills through participation in an elected dorm council.

The Life Skills Curriculum involves internalizing such skills as personal hygiene, appropriate appearance, domestic management, human sexuality, transportation, writing, financial management, and apartment living.

Learning style is analyzed in courses designed to develop career orientation. The students assess their optimal learning style, consider appropriate accommodations, and learn to verbalize their needs when the support of employers or others is required. Recognition and effective accommodation of personal learning style is essential to achieve independence and success.

Job orientation, job shadowing, interviewing, and volunteer placements are implemented with each student to promote independent working skills and career exploration. The Careers Curriculum develops for each student a personal plan of action that can be implemented by the student upon returning home to seek gainful employment.

The Independent Living Skills Curriculum taught at Horizons involves the learner in a multifaceted learning process. Skills are first introduced at the simplest level of instruction (e.g., a description of the skill and added manipulatives for trial and error comparison). A bi-weekly lab allows a student to practice the skill introduced in a controlled setting. Finally, from a grading point of view, the student will demonstrate the skill in a daily living skill assignment. The skill is internalized when the student utilizes the skill with ease in daily living--unassisted. No one component of the learning process can be eliminated, or adult independence in the particular skill will be compromised.

Upon graduating from the two year controlled program, students may elect to return home or to remain in the Birmingham area. Students remaining in Birmingham will move into apartments on their own and continue working while returning to Horizons for continuing education seminars.

Whether at home or in Birmingham, the Horizon student will draw heavily on the career, social, and independent living skills developed while in the program. When the Horizon student has integrated him/herself into the community to live and work satisfactorily, our goal of adult independence has been achieved.

References

Berkell, D., & Brown, J. (1989). *Transition from school to work for persons with disabilities*. New York: Longman.

Halpern, A. (1985). Transition: A look at the foundation. *Exceptional Children, 51*, 478-486.

Lundstram, F., & Politick-Haim, Y. (1990). *Continuing Projects: Why model transition projects continue after federal funding*. Unpublished manuscript, Transition Institute, University of Illinois, Champaign-Urbana.

ALABAMA'S IEP + LCCE

Mabrey Whetstone

The Individuals with Disabilities Education Act (Public Law 101-476) mandates that transition services be stated in the individualized education program (IEP) for each student beginning no later than age 16 and at a younger age, if determined appropriate. To facilitate the inclusion in the IEP of appropriate transition services, efforts have been made by Alabama's Division of Special Education Services to encourage the use of the Life Centered Career Education (LCCE) Curriculum as a frame work for meeting functional curriculum needs of secondary students with disabilities, in both school and nonschool settings (home, community, employment, and recreational). To assist Alabama's teachers in fulfilling the transition and IEP requirements, a goals and objectives Form incorporating LCCE curriculum has been developed.

> **. . . efforts have been made by Alabama's Division of Special Education Services to encourage the use of the Life Centered Career Education (LCCE) Curriculum. To assist Alabama's teachers in fulfilling the transition and IEP requirements, a Goals and Objectives Form incorporating LCCE curriculum has been developed.**

The **IEP Goals and Objectives LCCE Form** (see Figure 2) is an optional State Form which **only** may be used by teachers who are implementing the Life Centered Career Education instructional units and assessment batteries. All other state required pages of the student's IEP still must be included for there to be a complete IEP document. A sample of the Form for a hypothetical student is presented at the end of this paper.

The assessment information from the **Present Level of Performance Summary** should drive the development of the goals and objectives in the IEP. There should be a logical flow from the assessment information on this "Performance Summary" to the goals and objectives in the IEP, and from the goals and objectives to the daily lesson plans for a student.

The Competency Rating Scales (CRS) and/or the Student Competency Assessment Record (SCAR) (see Figure 1) may be used both to partly document the current level of educational performance and construct the goals and objectives for the IEP. For example, after the administration of the Knowledge Battery, the actual score and the percent of competency for each LCCE domain (Daily Living, Personal-Social, and Occupational) recorded on the SCAR could be used as one index of educational performance that is documented on the **Present Level of Performance Summary**. It is important that both strengths and needs from this assessment be indicated on the "Performance Summary."

Section I

In Section I of the **IEP Goals and Objectives Form** (see Figure 2), each of the annual goals identified represents one of the 22 LCCE competencies needed for adult living. After administering the appropriate LCCE assessment instrument(s) and documenting the results on the Performance Summary, the IEP Committee checks those annual goals which the student will work on during that IEP year. After each annual goal on the Form, the relevant transition service area(s) found in the bottom section of the "Transition" page of the IEP is abbreviated in parenthesis.

Section II

In Section II (see Figure 2), each of the short-term objectives represents one of the 97 LCCE subcompetencies. For each annual goal checked in Section I, check the corresponding objective which the student will perform during this IEP year. After each objective, the number in parenthesis indicates the annual goal to which the objective relates.

Section III

In Section III (see Figure 2), specific components for each objective identified in Section II are indicated. Note that objective criteria, type of evaluation, and the projected checkpoint date are addressed in the top paragraph.

- In the first column, indicate the annual goal number (from Section I), a decimal point, and the objective number (from Section II) (see Figure 2, example 3.14).
- In the second column, indicate the course title where this objective will be taught or the person/agency responsible for providing or paying for the implementation of the objective: example: math or vocational rehabilitation counselor.
- In column three, record the actual beginning date of instruction for the objective. In the final column, record the date that instruction on the objective was completed and the student's degree of mastery for that objective.

If other academic and/or transition goals and objectives not covered by the LCCE curriculum need to be included in the student's IEP, write them on the current State goals and objectives page(s) and attach them to this Form. Remember that all other State of Alabama required pages of the student's IEP must be included for there to be a complete IEP document.

An Illustration

Figures 1 and 2 present a hypothetical illustration of the use of the Student Competency Assessment Record (SCAR) and the **IEP Goals and Objectives Form - LCCE**. The IEP Goals and Objectives in Figure 2 represent a program developed from the results of the Knowledge and Performance Batteries, Form A (see Figure 1). Form B of the Batteries, the Competency Rating Scale and/or informal assessment may be used to annually evaluate each short-term objective. This description of student evaluation and curriculum planning simply represents a suggested approach. Every educator must determine for him/herself whether this approach is appropriate in a given setting.

FIGURE 1

STUDENT COMPETENCY ASSESSMENT RECORD (SCAR)

LCCE INVENTORY

Student's Name Sam Smith Age 17 Grade 11

School Anytown Examiner Jones

KNOWLEDGE BATTERY				PERFORMANCE BATTERY					MASTERY		
LCCE COMPETENCY	# ITEMS	FORM A SCORE	FORM B SCORE	# ITEMS	FORM A SCORE	DATE	FORM B SCORE	DATE	TOTAL	PARTIAL	NONE
I. DAILY LIVING SKILLS		DATE 4,93	DATE /								
1. Personal Finances	10	3		10		/		/			✓
2. Home Management	10	8		10	8	5/93		/	✓		
3. Personal Needs	10	4		10		/		/			✓
4. Family Living	10	5		10		/		/			✓
5. Foods	10	9		10	6	5/93		/		✓	
6. Clothing	10	7		10		/		/			✓
7. Citizenship	10	6		10		/		/			✓
8. Recreational/Leisure	10	9		10	8	5/93		/	✓		
9. Mobility in Community	10	6		10		/		/			✓
TOTALS	90	57/63%	/ %						2	1	6
II. PERSONAL-SOCIAL SKILLS		DATE 4,93	DATE /								
10. Self-Awareness	10	6		10		/		/			✓
11. Self-Confidence	10	6		10		/		/			✓
12. Responsible Behavior	10	7		10		/		/			✓
13. Interpersonal Skills	10	6		10		/		/			✓
14. Independence	10	5		10		/		/			✓
15. Decision Making	10	3		10		/		/			✓
16. Communicating	10	8		10	8	5/93		/	✓		
TOTALS	70	41/59%	/ %						1	0	6
III. OCCUPATIONAL SKILLS		DATE 4,93	DATE /								
17. Occ. Possibilities	10	6		10		/		/			✓
18. Occ. Choices	10	6		10		/		/			✓
19. Work Behavior	10	8		10	5	5/93		/		✓	
20. Securing Employment	10	2		10		/		/			✓
21. Physical / Manual				10	2	5/93		/			✓
22. Occ. Skills						/		/			
TOTALS	40	22/55%	/ %						0	1	4
GRAND TOTAL	200	120/60%	/ %						3	2	16

*Note: In the last column (Mastery), check Total for each competency the student has met or exceeded the criterion level of 8 (Knowledge Battery) and 8 (Performance Battery); check Partial if the criteria was met for only one Battery; check None if none were met.

BEST COPY AVAILABLE

FIGURE 2

IEP GOALS AND OBJECTIVES FORM
LIFE CENTERED CAREER EDUCATION

(Use attachments as needed for each student)

Student Name Sam Smith School Year ___________

SECTION I: Annual Goals - LCCE Functional Skills for Transition Preparation (Check those that apply). This student will progress toward acquiring functional behaviors in the following competency areas. Transition service area(s) is indicated in parenthesis.

✓ 1. Managing Personal Finances (FM)
___ 2. Selecting and Managing a Household (PM)
✓ 3. Caring for Personal Needs (PM, M)
___ 4. Raising Children and Meeting Marriage Responsibilities (PM)
✓ 5. Buying, Preparing, and Consuming Food (PM)
✓ 6. Buying and Caring for Clothing (PM)
___ 7. Exhibiting Responsible Citizenship (CP)
___ 8. Utilizing Recreational Facilities and Engaging in Leisure (CP)
9. Getting Around the Community (T)
✓ 10. Acquiring Self-Awareness (PM)
11. Achieving Self-Confidence (PM)
✓ 12. Achieving Socially Responsible Behavior (PM)
___ 13. Maintaining Good Interpersonal Skills (PM)
___ 14. Achieving Independence (A/G)
✓ 15. Making Adequate Decisions (A/G)
___ 16. Communicating with Others (A/G)
___ 17. Knowing and Exploring Occupational Possibilities (ED)
___ 18. Selecting and Planning Occupational Possibilities (ED, VE)
✓ 19. Exhibiting Appropriate Work Habits and Behaviors (ED, VE)
✓ 20. Seeking, Securing, and Maintaining Employment (ED)
✓ 21. Exhibiting Sufficient Physical-Manual Skills (ED)
___ 22. Obtaining Specific Occupational Skills (ED)

SECTION II: Objectives - LCCE Functional Skills for Transition Preparation (Check those that apply). This student will perform each objective identified below.

✓ 1. Identify Money & Make Correct Change (1)
✓ 2. Make Responsible Expenditures (1)
___ 3. Keep Basic Financial Records (1)
___ 4. Calculate and Pay Taxes (1)
5. Use Credit Responsibly (1)
✓ 6. Use Banking Services (1)
___ 7. Maintain Home Exterior/Interior (2)
___ 8. Use Basic Appliances and Tools (2)
___ 9. Select Adequate Housing (2)
___ 10. Set Up Household (2)
___ 11. Maintain Home Grounds (2)
___ 12. Demonstrate Knowledge of Physical Fitness, Nutrition, and Weight (3)
✓ 13. Exhibit Proper Grooming and Hygiene (3)
✓ 14. Dress Appropriately (3)
✓ 15. Demonstrate Knowledge of Common Illness, Prevention, and Treatment (3)
___ 16. Practice Personal Safety (3)
___ 17. Demonstrate Physical Care for Raising Children (4)
___ 18. Know Psychological Aspects of Raising Children (4)
19. Demonstrate Marriage Responsibilities (4)
✓ 20. Purchase Food (5)
✓ 21. Clean Food Preparation Areas (5)
___ 22. Store Food (5)

FIGURE 2 (con't)

____ 23. Prepare Meals (5)
____ 24. Demonstrate Appropriate Eating Habits (5)
____ 25. Plan and Eat Balanced Meals (5)
✓ 26. Wash/Clean Clothing (6)
✓ 27. Purchase Clothing (6)
____ 28. Iron, Mend, and Store Clothing (6)
____ 29. Demonstrate Knowledge of Civil Rights and Responsibilities (7)
____ 30. Know Nature of Local, State, and Federal Governments (7)
____ 31. Demonstrate Knowledge of the Law and Ability to Follow the Law (7)
____ 32. Demonstrate Knowledge of Citizen Rights and Responsibilities (7)
____ 33. Demonstrate Knowledge of Available Community Resources (8)
____ 34. Choose and Plan Activities (8)
____ 35. Demonstrate Knowledge of the Value of Recreation (8)
____ 36. Engage in Group and Individual Activities (8)
____ 37. Plan Vacation Time (8)
____ 38. Demonstrate Knowledge of Traffic Rules and Safety (9)
____ 39. Demonstrate Knowledge and Use of Various Means of Transportation (9)
____ 40. Find Way Around the Community (9)
41. Drive a Car (9)
✓ 42. Identify Physical & Psychological Needs (10)
43. Identify Interests and Abilities (10)
✓ 44. Identify Emotions (10)
____ 45. Demonstrate Knowledge of Physical Self (10)
____ 46. Express Feelings of Self-Worth (11)
____ 47. Describe Others' Perception of Self (11)
____ 48. Accept and Give Praise (11)
____ 49. Accept and Give Criticism (11)
____ 50. Develop Confidence in Oneself (11)
____ 51. Demonstrate Respect for the Rights and Properties of Others (12)
✓ 52. Recognize Authority and Follow Instructions (12)
____ 53. Demonstrate Appropriate Behavior in Public Places (12)
✓ 54. Know Important Character Traits (12)
____ 55. Recognize Personal Roles (12)
____ 56. Demonstrate Listening and Responding Skills (13)
____ 57. Establish and Maintain Close Relationships (13)
____ 58. Make and Maintain Friendships (13)
____ 59. Strive Toward Self-Actualization (14)
____ 60. Demonstrate Self-Organization (14)
____ 61. Demonstrate Awareness of How One's Behavior Affects Others (14)
____ 62. Locate and Utilize Sources of Assistance (15)
____ 63. Anticipate Consequences (15)
____ 64. Develop and Evaluate Alternatives (15)
✓ 65. Recognize Nature of a Problem (15)
✓ 66. Develop Goal-Seeking Behavior (15)
____ 67. Recognize and Respond to Emergency Situations (16)
____ 68. Communicate with Understanding (16)
____ 69. Know Subtleties of Communication (16)
____ 70. Identify Remunerative Aspects of Work (17)
____ 71. Locate Sources of Occupational and Training Information (17)
____ 72. Identify Personal Values Met Through Work (17)
____ 73. Identify Societal Values Met Through Work (17)
____ 74. Classify Jobs into Occupational Categories (17)
____ 75. Investigate Local Occupational and Training Opportunities (17)
____ 76. Make Realistic Occupational Choices (18)
____ 77. Identify Requirements of Appropriate and Available Jobs (18)
____ 78. Identify Occupational Aptitudes (18)
____ 79. Identify Major Occupational Interests (18)
____ 80. Identify Major Occupational Needs (18)
____ 81. Follow Directions and Observe Regulations (19)
____ 82. Recognize Importance of Attendance and Punctuality (19)
____ 83. Recognize Importance of Supervision (19)
____ 84. Demonstrate Knowledge of Occupational Safety (19)
85. Work with Others (19)
✓ 86. Meet Demands for Quality Work (19)
✓ 87. Work at a Satisfactory Rate (19)
✓ 88. Search for a Job (20)
✓ 89. Apply for a Job (20)
✓ 90. Interview for a Job (20)
____ 91. Know How to Maintain Post-School Occupational Adjustment (20)
____ 92. Demonstrate Knowledge of Competitive Standards (20)
____ 93. Know How to Adjust to Changes in Employment (20)
✓ 94. Demonstrate Stamina and Endurance (21)
✓ 95. Demonstrate Satisfactory Balance and Coordination (21)
____ 96. Demonstrate Manual Dexterity (21)
____ 97. Demonstrate Sensory Discrimination (21)

FIGURE 2 (con't)

Student Name Sam Smith School Year ____________

SECTION III: Specific Objectives Components - LCCE Functional Skills for Transition Preparation

Objective criteria for each objective checked can be found in the LCCE instructional units and assessment batteries. Each objective will be *evaluated* utilizing the Competency Rating Scale, Knowledge Battery, Performance Battery and/or informal assessment *at least annually*.

Goal • Objective Number	Course or Agency Responsible	Initiation Date	Completion Date/Degree of Mastery
1.1	Math	9/1/93	12/2/93-80%
1.2	Home Economics	11/15/93	1/5/94-75%
1.6	Math		
3.13	Science	9/15/93	10/15/93-90%
3.14	Home Economics	10/15/93	11/15/93-85%
3.15	Science	2/11/94	
5.20	Math	1/10/94	
5.21	Science		
6.26	Home Economics	1/10/94	
6.27	Math		
10.42	Science	12/1/93	2/10/94-84%
10.44	Science		
12.52	Social Studies	2/20/94	
12.54	Social Studies	10/20/93	11/18/93-75%
15.65	Social Studies	2/26/94	
15.66	Social Studies		
19.86	Vocational Rehab		
19.87	Vocational Rehab		
20.88	Job Coach	2/10/94	
20.89	English	2/1/94	
20.90	English		
21.94	Physical Education	9/1/93	
21.95	Physical Education	9/1/93	

TRANSITION SERVICES AND OPPORTUNITIES IN YOUR ALABAMA COMMUNITY

Beverly Lavender, Moderator

Transition services for students with disabilities are mandated in The Individuals with Disabilities Education Act (IDEA) (Public Law 101-476). The term "transition services" has been defined as a coordinated set of activities for a student, designed within an outcome-oriented process, that promotes movement from school to post-school activities, including post secondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, and independent living or community participation [Alabama Administrative Code 200-080-090-.09(2)] Section 300.18. Few special education teachers have had substantial experience coordinating services with agencies outside the school system. This requirement, which places the special education teacher in the role of case manager in most cases, leaves the special education teacher in need of information about community resources/opportunities.

Special education teachers are encouraged to develop a "community transition services file" which relates to the needs of the students with disabilities whom they serve. The following reviews will hopefully be the beginning of such a file for special education teachers, counselors, and the like in your area.

Teachers are encouraged to survey their communities for all possible generic services, as well as specialized services for persons with disabilities. By carefully reviewing the transition related documentation in a student's individual education plan, the major areas of transition services are listed, including: (a) Vocational Evaluation, (b) Employment Development, (c) Financial Management, (d) Personal Management, (e) Living Arrangements, (f) Advocacy/Guardianship, (g) Community Participation, (h) Transportation, (i) Medical, and (j) Other.

The above services may be provided by the following agencies, which are located in most communities/counties throughout Alabama:

- **Vocational Rehabilitation Services (Transition Services)**
- **Supported Employment**
- **The ARC - Recreation Programs**
- **Mental Health/Mental Retardation Community Living Arrangements**
- **Specific Learning Disabilities Projects**
- **Adult Education**

Special education teachers are encouraged to develop a "community transition services file" which relates to the needs of the students with disabilities whom they serve. The following reviews hopefully will be the beginning of such a file for special education teachers, counselors, and the like in your area. These service agencies are briefly presented below by each of the agency representatives.

Adult Vocational Rehabilitation Service
Division of Rehabilitation Services
Department of Education

Rebecca S. Fields

The Division of Rehabilitation Services is a state and federally funded service for students and adults with vocational limitations that may cause problems in seeking or maintaining a job. Anyone can refer a student for consideration of eligibility, including the special education instructor, vocational instructor, counselor, principal, psychometrist, vocational evaluator, school nurse, etc.

The presence of a disability alone does not mean that an individual is vocationally handicapped. If, however, the disability interferes with the student's ability to maintain employment, vocational rehabilitation can help. We serve people with a broad range of disabilities, such as blindness, deafness, cardiovascular conditions, mental retardation, neurological disorders, orthopedic impairments, and specific learning disability.

> **We attempt to focus our attention on those students who may be struggling to survive in the academic environment, at a higher risk for dropping out of school or who may be causing problems at school, home, community, or with the court system.**

A rehabilitation counselor will meet with the student to discuss her/his individual needs, and services which may be included, such as: (a) testing to learn about specific interests, strengths, aptitudes, and desires; (b) medical evaluation to examine the current health and medical needs of a student and/or simply the completion of a medical history questionnaire; (c) counseling to help students plan their future and make a successful transition from school to employment including community living and leisure activities; (d) training in school; (e) part-time employment; (f) on-the-job training; (g) additional training after graduation, and (h) job placement to assist the student in selecting the right job to meet their specific needs.

We also have available "supported employment services" to assist severely disabled students with the services of a job coach, as well as supported employment placement. After an individual enters employment, we also insure their continued success on the job, including the perfect job match, and follow up on the job.

We attempt to focus our attention on those students who may be struggling to survive in the academic environment, at a higher risk for dropping out of school, or who may be causing problems at school, home, community, or with the court system. Furthermore, we attempt to address their needs in a comprehensive service delivery effort with Rehabilitation Services playing an integral team player to help the exceptional youth become productive, work with the family, provide training, counseling, guidance and related services necessary to transition a student, or bridge the gap between a highly structured and secure academic/school environment to the opportunities and risks of adult life.

The rehabilitation counselor develops the Individualized Written Rehabilitation Plan (IWRP) with the student, family, vocational evaluator, and teacher. Along with addressing the transitional goals, we assist in developing the IEP, which reflects the IWRP.

We feel the beauty of our agency is in the multiplicity of services available to students with disabilities. Our main goal is to assist these young students to become employed in the right job and further their career.

In summary, if a student at least 16 years of age (or in the ninth grade) is limited in his or her ability to work due to physical, mental, or emotional factors, Rehabilitation Services will be able to help through a planned program of services. Successful rehabilitation is dependent upon active student involvement. Active communication is maintained with school personnel and parents. Through the networking with school personnel, parental support, and student's active participation along with the multiplicity of services provided by our agency, we feel students will be able to reach their maximum potential.

Birmingham's Supported Employment Program

Brenda Carson

The Association for Persons in Supported Employment (APSE) is moving forward this year to examine the issue of National Certification for Employment Specialists. It will be a major topic of discussion at the National APSE meeting this year in San Francisco. Brenda Carson serves on the Executive Board of APSE.

United Cerebral Palsy of Greater Birmingham's Supported Employment Program, in partnership with the State of Alabama Vocational Rehabilitation Services and the Department of Mental Health and Mental Retardation, is putting persons with the most severe disabilities to work. This cooperation of efforts has caused a stir of excitement in all areas of employment and in the disability community. Assistive Technology and other support services are being made available, accessible, and affordable. Persons with severe disabilities are becoming valuable, productive members of the workforce. This provides more than jobs. It creates opportunities for full inclusion in society, which is more than just making a living. For example, most of the persons employed have begun living in their own apartments, managing their own lives. UCP provides support services to all.

An equally significant force throughout the reauthorization of the Rehabilitation Act has been the voices of people with disabilities as "customers" versus "clients" of a system. UCPA is conducting a multiple-site National Choice Demonstration Project with support and assistance from identified national experts, in order to implement a process for accessing choice by persons with disabilities. The Choice Access Project will provide a system of supports and services guided by individual choices and preferences of the customers--people with disabilities.

The Association for Persons in Supported Employment (APSE) is moving forward this year to examine the issue of National Certification for Employment Specialists. It will be a major topic of discussion at the National APSE meeting this year in San Francisco. I serve on this Executive Board.

"Stepping-Out": The Arc of Calhoun County

Nan Christian

The Arc of Calhoun County, with offices in Anniston, is an advocacy group for approximately three thousand children and adults with mental retardation. One of the areas in which the Arc has been active for about fifteen years is social and recreational development for persons with disabilities. Beginning in 1978, with a once-a-month recreational program for adults called "Stepping Out" and co-sponsored by the Anniston Parks and Recreation Department, Arc developed a year-round program for children and adults with mental retardation, networking on a continuing basis with other service providers at the local and state level.

The program of slides presented for Transition IV showed the variety of families whose children and adult members who are served by Arc's program. It depicts adults with disabilities who not only "Step Out" into recreational activities every Tuesday night, but who participate in Special Olympic bowling, softball, and track and field events throughout the year. Adults who once were shy and withdrawn now have full and eventful social lives, with lots to talk about, places to go, and things to do.

The Arc of Calhoun County, with offices in Anniston, is an advocacy group for approximately three thousand children and adults with mental retardation. One area in which our Arc has been active is through our social and recreational "Stepping Out" program.

But adulthood is much too late to begin the development of these social/recreational skills. The Arc slide presentation also showed elementary through high school students participating in a year round Special Olympic program, which includes not only the traditional track and field events, but also power lifting, skiing, basketball, softball, soccer, and weekly swim and roller skating sessions. It shows these youngsters progressing to regional, state, and international competitions, with all the fun and excitement that accompanies these activities.

The Arc presentation also depicts the summer day camps which strive to provide vacation fun and field trips while maintaining and even expanding the progress made in special education during the school year. Six week camps are provided for children with moderate retardation and multiple disabilities, and a language camp for both disabled and non-disabled students who need speech therapy.

The Arc presentation concludes with pictures of dinners, fashion shows featuring models with disabilities, and Christmas celebrations in which everyone participates! A "Kids on the Block" puppet program which is presented to "normal" third and fourth grade students to educate and sensitize them to persons with disabilities is one of the most recent additions to the Arc advocacy program. A mobile recycling crew, staffed by young men with retardation, is an example of transitioning from school to employment. The Arc theme throughout our presentation emphasizes that:

> *"if life is to be lived, it must be lived to the fullest extent possible. The social/recreational development of all persons is essential to happiness."*

Community Living Alternatives: Department of Mental Health and Mental Retardation

Ellen Gillespie

New options in community living are growing steadily in Alabama. Alabama is in the midst of tremendous system change, including significant downsizing of public institutions. In the next four years, for example, the population of these facilities will decrease by almost 50%. At the same time, resources for community services have increased. In 1993, services for people with mental retardation reached a significant milestone - more people in Alabama were provided living support in the community than in institutions. Data from the DMH/MR State Plan indicates this trend will continue, as it has in other states.

Emphasis in Region V is placed on mission - driven organizations. Specifically, the mission of Region V is to support consumers and families in "choosing" homes, jobs, and support services of the highest quality, and in living as valued members of the community. The institution in Region V, the Glenn Ireland Developmental Center, focuses on transition as its primary mission.

Community living in Alabama focuses on the following concepts:

- **Systems designed by consumers and their families**
- **Efforts to support people at home with their families**
- **Individualized arrangements, not a proliferation of more "group homes"**
- **Sites and housemates chosen by individuals, or based on their preferences**
- **Emphasis on Personal Futures Planning and development of circles of support**
- **Very small homes (1-3 persons)**
- **Outcome - based emphasis on quality**

The Lakeshore Project for Individuals with Specific Learning Disabilities[1]

Linda Hames

The purpose of the SLD Project at Lakeshore is to develop, implement, and evaluate a model program for adolescents and adults with specific learning disabilities using a rehabilitation facility as a base of operation. Major objectives include, but are not limited to: (a) development of a consumer-directed

---

[1] Lakeshore Rehabilitation Facility (LRF) is a state-operated facility under the supervision of the State Department of Education, Division of Rehabilitation Services, Adult Vocational Rehabilitation Services (AVRS). LRF was awarded a three-year grant by the Rehabilitation Services Administration. This was one of four such nationally funded grants through the Program for Special Projects and Demonstrations, Office of Special Education and Rehabilitative Services, U.S. Department of Education.

The purpose of the Lakeshore SLD Project is to develop, implement, and evaluate a model program for adolescents and adults with specific learning disabilities using a rehab facility as a base of operation.

program through the guidance of a consumer management team; (b) development and implementation of model program service delivery components in the areas of diagnosis, vocational evaluation, employability development, preparation for post-secondary training, job placement, and follow-along services provided by participation in a peer support group network; (c) dissemination of successful methods for each component by means of a printed manual to include curricula, as well as training in these methods; (d) replication of the project in other rehabilitation facilities statewide; and (e) community involvement, which includes the Learning Disabilities Association of Alabama (LDA).

All referrals for project participation must be made by counselors of the Division of Adult Vocational Rehabilitation Services. Following the referral, clients are scheduled to enter a comprehensive four or five day period of assessment. This evaluation may (a) determine an appropriate diagnosis of specific learning disability; (b) validate or recommend a feasible vocational objective; (c) validate or recommend post-secondary training; (d) recommend reasonable accommodations or modifications; (e) determine the vocational implications of an individual's patterns of strengths and limitations; or (f) recommend further services. A report which summarizes the results and recommendations of the evaluation is generated and is useful in planning for an individual's future.

Two programs are offered upon completion of assessment which help prepare adolescents and adults for successful experiences in employment or post-secondary training. Both programs include training in (a) disability and self-awareness, (b) self-concept, (c) self-advocacy, (d) appropriate use of accommodations, (e) social skills, (f) interpersonal skills, and (g) career exploration.

The Lakeshore Project has been highly successful. The demand for such services is great in the state of Alabama and will increase as transition continues to gain momentum. The project will be replicated during the next year at other sites within the state making these services available to a greater number of individuals.

MOBILE'S JOINT IEP/ITP MEETINGS

Ann Hilderbrand

Each year in Mobile County Public Schools, special education teachers, vocational rehabilitation counselors, and vocational education staff members participate in more than 600 joint IEP meetings. The transition section of IDEA states that each student must have a coordinated set of activities in his/her IEP. Also, if transition services for a student are to be discussed, representatives of any agency that is likely to be responsible for providing or paying for transition services must be invited.

If an agency is invited to send a representative to a meeting and does not do so, the school "must" take other steps to obtain the participation of the agency in planning transition services. For us, these requirements became cause for thought. There are approximately 1,000 special education students age 16 or older in Mobile County. There are three Vocational Rehabilitation Transition Counselors and three Special Needs Population Coordinators. Thus, as you can see, arranging for Vocational Education and Vocational Rehabilitation Service representatives to be at each IEP/ITP meeting could be an impossible task if handled by 125 teachers individually.

The transition section of IDEA states that each student must have a coordinated set of activities in his/her IEP. Also, if transition services for a student are to be discussed, representatives of any agency that is likely to be responsible for providing or paying for transition services must be invited.

In order to extend professional courtesy and to recognize the demands on people's time, *Bulletin 21*, *Transition and the IEP*, suggested that the local school system coordinate IEP meetings at the secondary level. So, two years ago, we started developing a schedule to coordinate the many meetings to insure the opportunity for agency and vocational education participation.

A planning committee composed of the three Vocational Rehabilitation Counselors, the three Special Needs Population Coordinators, and myself took a calendar and set meeting dates, established test dates, and identified and planned a schedule to include all of the 16 high schools. According to the size of the special education population in each school, the school was scheduled 2 to 4 days for joint IEP meetings. The teachers were sent a calendar and general reminder of information to consider when planning a schedule for their school. Some of the information included were reminders about the following areas:

- **Students to be scheduled during the assigned IEP/ITP time should include the following:**

  1. Students who have had a vocational evaluation and have been recommended for a vocational program or are interested in vocational education,
  2. students who are presently enrolled in a vocational program and wish to continue studies at the AVC,
  3. students whose parent(s) want the vocational evaluation results interpreted,
  4. students to be referred to VRS, and
  5. students who are VRS clients.

- **Have the following information about each student available.**

  1. Copy of cumulative record (needed to determine credits, status, etc.),
  2. discipline file, and
  3. attendance record for present year.

- **The implementation date for any IEP/ITP written earlier than April should be stated as follows.**

  Example: February 2, 1994 - June 4, 1994
  September 1, 1994 - February 2, 1995

- **IEP/ITP's written in April and May continue to be dated as follows.**

  Example: September 1, 1994 - June 4, 1995

  Any IEP/ITP written before April must be reviewed and rewritten by the anniversary date of the following year.

The special education chairperson in each school was asked to coordinate the IEP/ITP schedules for the assigned dates. They were asked to work with the principal to cover classes of teachers attending IEP/ITP meetings. After the Spring 1993 meetings, the planning group met again to assess the effort. Several suggestions were made and plans developed for improving the process.

One problem which concerned the teachers was coordinating a schedule for their assigned days. As such, a Form was developed to assist. The Form is to be completed and mailed to the Vocational Rehabilitation Counselors, Special Needs Population Coordinators, and the Special Education Office two weeks in advance of the assigned date. This allows time for the involved staff member to collect data about the individual students, and also serves as an invitation to the IEP/ITP meeting.

At first, many of the teachers resisted to the idea of assigned times for IEP/ITP, or did not like the early date they were assigned. By the end of the year, however, many were expressing how glad they were that they had held early IEP meetings and were not so rushed at the close of school.

In early August, 1993, the Planning Group met to plan the schedule for the 1993-94 school year. The calendar, a copy of the reminders, and the suggested schedule Form were included in the teachers reference guide, and disseminated in August and September of that year.

The transition section (the section containing information about joint IEP/ITP meetings) of the Special Education Reference Guide was discussed at several inservice programs conducted during the Fall. This Spring, I am mailing a reminder memo to each teacher one month before their assigned date. We hope the process is even more successful than last year. And, the Planning Committee is scheduled to have another evaluation meeting in June.

Vocational Education has a mandate to participate in the IEP process. If students are to succeed in the most appropriate environment, then a sharing of information and joint development of strategies is necessary. As a discipline, vocational education has it's own requirements for students and teachers. Some of these requirements are set by the federal government and other requirements by Alabama's State

Department of Education. Student placement into a vocational program should not come with objectives that would dilute the vocational curriculum to the point of jeopardizing the integrity of the program.

In summary, joint meetings provide the perfect opportunity to offer explanations of what vocational education is all about. Occupational programs are different from vocational programs. Expectations for students in these types of programs also are different. Points of discussion might include: (a) area Vocational Centers, (b) program expectations/outcomes, and (c) program setting. Of course, the more information shared and discussed will lead to a better understanding of those parties in the IEP meeting. Better decisions come from informed people. In essence, the ultimate goal is getting the right student into the right program!

U of A's SELF-ADVOCACY APPROACH FOR STUDENTS WITH LEARNING DISABILITIES

Rhett Brandt

Definitions of Self-Advocacy

Self-advocacy has several definitions in different areas, but what I wish to present here is a clear and simple definition. The definition that I will be using is:

> ***"The ability to discuss with another person the limits that an individual may face as a part of a disability or a learning disability."***

Thus, questions that self-advocacy seek to answer may include the following: "What does an individual face when they are trying to get a job and they know that their Learning Disability is going to affect their job in some way?" "How do they interact with employees on that job?" "How do they behave in their personal social relationships, and how can this be changed for the better?" "What do they say, when do they say it, how do they say it, and how much do they say?"

A Controversy

There is some talk of the idea that self-advocacy only should be concerned with the individual who needs to disclose a disability to an employer. It is our view, however, that self-advocacy is part of a plan for growth in the students, and that the disclosure to the employer is only one step in that growth process. Even if the student knows how to disclose to an employer, what good is that to the student in his/her social situations? As well, what good is that after he or she begins work? For these and other reasons, our focus is on self-advocacy as a process to develop the student over a period of time.

What is LD?

It also is necessary for a definition of a Learning Disability to be presented here, so that we all have a common definition with which to work. Briefly, a Learning Disability is a brain dysfunction that can affect individuals of average or above average intelligence, in which the individual faces a problem in processing information. This means that what they see may not be what the rest of us see, because they are not processing the information in the same way. So far as we know, this problem cannot be totally overcome through learning how to see things as "others" do. But, people with learning disabilities can learn to compensate for their problem, and be as productive as so called "normal" individuals.

The Importance of Self-Advocacy

Self-advocacy is vital to any college student with a learning disability. It sets up a link between what the student knows about himself/herself and the outside world. In order for LD students to be able to request accommodations and to be recognized as having a disability, it will be necessary for them to explain to a prospective employer about themselves and their learning disability. It also is important for the student to begin overcoming problematic social relations and problems with low self-esteem.

How is LD Different?

What is the purpose for this Transition IV session? It is to help us better understand the special needs of an LD student in self-advocacy. An LD student has some very clear differences between himself/herself and other clients as it pertains to self-advocacy. For one thing, they are faced with a public that is largely ignorant of their problem. Many disabilities face this problem, but since LD is largely hidden and the organic problems so hard to pinpoint, educating people about this disability is a difficult task.

> ***Self-advocacy is vital to any college student with a learning disability. It sets up a link between what the student knows about himself/herself and the outside world.***

LD students also face greater challenges in self-advocacy, due to the fact that many of these students have severe problems understanding the social area. In self-advocacy, the student is forced to deal with the public, which for many LD students is a weak area.

So, we have discussed some ways in which LD is an area of special need. In order for us to gain clarity, however, it seems that some examples could be helpful. Presented here is a specific example of how a Learning Disability is different from other disabilities as it pertains to self-advocacy.

- **Student with a visible disability:** A student who is a dominant arm amputee has some very clear limitations on what he/she might be able to do. It is more likely that these limits will be clear to an employer. From looking at the student, for example, we can see that they are limited in their "carrying" ability. Also, having lost the dominant arm, we can understand that many have trouble with writing, eating, and the like.

- **Student with a Learning Disability:** An LD student cannot see physical angles. This problem is a bit more nebulous and difficult to comprehend. The student that lost a dominant arm does have some hidden problems (such as adjustment), but will be easier for an employer to see the problem. With a learning disability, however, it will be up to the student to explain more specifically the nature of the problem. Also, it will be necessary for the employer to carefully listen about the problem, as well as understand it. Furthermore, the LD student looking for a job must be able to note when it will effect him/her more as an architect than as a journalist. Now, let us move on from the **why's** of LD and self-advocacy, and begin to look at the **how's**.

How to Spot a Good Self-Advocate

1. **Understanding of self and of personal strengths and weaknesses:** This is the first step along the road to being a good self-advocate. No matter how many other skills you may have, if you do not understand your own personal strengths and weaknesses, it will be difficult for you to be a good self-advocate. When interviewing for a position, prospective employees must know what qualifications they have, and this need is even more clear for LD students. They must be able to say *"You need to hire me because of my qualifications, but my weaknesses are ______ and _______. I will assist with them."* Without a knowledge of self, this would be impossible. It is vital for these students to know from where they are coming. If they do not, then they are merely seen as confused individuals.

2. **Understanding of your Learning Disability and how it affects you personally.** The next component of a good self-advocate is an understanding of the learning disability that affects the student, and in what ways it effects them. A basic and general understanding of LD is not going to help the student in any way with their self-advocacy. Each student must know and understand what their personal disability is, and how it affects them. The student must be able to understand where the LD fits within themselves, and how it limits them specifically.

3. **Understanding if and how the LD will affect you at work, at school, or in a social setting.** Once students have an understanding of their Learning Disability and how it affects them, they must find a way to understand how it will affect them in a variety of settings. Of course, this will vary from job-to-job and situation-to-situation, so it may be difficult to learn. The best way for the student to learn this would be through asking questions, role playing, and, if possible, job shadowing. This involves having the student follow an employee for a day or two to see what skills are needed for a particular job.

4. **Knowing how to communicate what you know to your employer, teacher, or person on the street.** The final link in the chain of what makes a good self advocate is the skills to clearly communicate what you know to the employer, or any other individual in a work or social context. No matter how much you know about yourself and your LD, and how good your other skills are, if you cannot communicate it then you are lost. The student must understand as much about the communication process as possible. This involves having a working understanding of verbal and non-verbal communication, appropriate questioning, appropriate language, and more. Again, without this final link of communication, the student cannot be a good self-advocate.

Who is Better as a Self-Advocate?

What types of characteristics separate a good self-advocate from a poor one? What types of things makes one student more likely to be successful in the self-advocacy process?

- **What makes for a good self-advocate?**

1. Individuals who are internally self-assured (this helps them to take criticism and still feel worthy).
2. Individuals who are invested in high self-esteem, have a strong sense of self.
3. Individuals able to separate self from other (this allows them to take criticism from the outside).
4. Individuals who are assertive, willing to ask for appropriate attention and make appropriate demands for the individual's special needs.
5. Individuals who are socially attached, who are good social ties.
6. Individuals who are responsible.
7. Individuals who are flexible, independent, motivated.
8. Individuals who are willing to negotiate and change.

In summary, these characteristics will help the individual to be successful in their self-advocacy. These are people who can take some criticism from an employer--and not fall apart. They also are willing to see what demands are appropriate for them in the situation, and make them known!

- **What makes for less effective self-advocates?**

  1. Individuals who think they can "get by" without accommodation or identification. Although many students have this attitude, research has shown that many LD students do require accommodations in the workplace.
  2. Individuals who are unwilling to learn new skills.
  3. Individuals who are rigid, inflexible, dependent people.
  4. Individuals who are extremely needy people (anyone who demands approval from all people cannot be a good self-advocate).

It will be necessary for the student to make demands that others will find unfair, based on their ignorance of the problems faced by the LD worker. But, the demand will be necessary for students to be successful in their career.

Strategies

We have discussed the definitions of self-advocacy, the components of a good self advocate, and who is better prepared to self advocate for themselves in the world-of-work. Now, we will look at how a counselor or teacher can help the student to build the skills that can make the student a better self advocate. By improving these skills, the student can be a more capable self-advocate.

1. Role play an advocating situation

Role playing is the most effective way to train a student in self-advocacy. You place the student in a situation where they must face the exact problem areas that need improvement. One suggestion is to video tape the role play so that the students can review it on their own time–and do so repeatedly. It also is a good suggestion to have the counselor role play the student, in order to model the thought process for them. Also, when the counselor is playing the employer, they can play both a "good" and a "bad" employer:

GOOD EMPLOYER	BAD EMPLOYER
● listens	● doesn't listen
● responds	● feels threatened-law suit
● understands	● doesn't understand-doesn't want to
● changes	● refuses to change
● is willing to help	● won't make "exceptions"
● discusses accommodations of others	● gives advice (negative) "why don't you try sheltered employment" or "If I were you, I would do for myself..."

2. Assertiveness training

The goal of assertiveness training is to help students learn when and where to assert their will. As we all know, there are times when is it necessary that we be heard, and times that we remain quiet. With the LD population, it is important to stress this aspect of transition into work. Many of the students are likely to have problems with nonverbal communication and social skill deficits. Learning this type of information is vital for them.

Teaching the student appropriate times to demand that they be heard is a vital part of training assertiveness. Also, they must learn the differences between aggressive, assertive, and passive behaviors. The teacher must stress that the student/client not be aggressive when approaching a work situation, since these behaviors are seen as highly negative in a work situation. Aggressive behaviors will be seen as a definite problem by any potential employer. Passiveness, on the other hand, can be just as bad. An employer is usually looking for a person with high levels of motivation toward work. A passive attitude reflects poorly on the LD student. The goal here is to teach the student to walk the line between aggression and passivity. This is assertiveness, which has been defined as:

> ***"the right to be, and express him/herself and feel good (not guilty) about doing so, without hurting others in the process."***

3. Communication skills training

Also, it is important to teach individuals with learning disabilities how to effectively communicate with co-workers, supervisors, and other people in the work environment. Without such skills, it is unlikely that they will be able to maintain a job for any great period of time. They might get through an interview, but they will not be capable of continuing on the job. They must learn appropriate communication, which can be accomplished by cognitive restructuring, role plays, and group work. They also need to learn the forms of communication and when they are used. This is achieved by educating them on verbal and nonverbal cues. They learn these skills best if the teacher will role play the thought processes necessary when reading and giving these cues. An article by Mellard and Hazel (1992) suggested that the LD student will do best with a variety of experiences for learning. They suggest modeling, rehearsing, coaching, feedback and reinforcement, cognitive restructuring, and homework as a good batch of areas that the teacher and student might use to learn the skills that are needed.

References

Egly, N., et al. (1991). Self-advocacy and assertiveness for LD college students and how to use self-advocacy skills. *A Postsecondary study manual*. no. 4, part 2, University of Nebraska at Lincoln.

Leuenberger, et al. (1992). *Peer workshop training manual*, Sponsored by the Office of Special Education and Rehabilitative Services, Washington DC.

Mellard, D., & Hazel, J. (1992). Social competencies as a pathway to successful life transitions. *Learning Disability Quarterly*, *15*(4), 251-274.

Phillips, P. (1990). A Self-advocacy plan for high school students with learning disabilities: A comparative case study analysis of students', teachers', and parents' perceptions of program effects. *Journal of Learning Disabilities, 23*(8), 466-471.

Shaw, S., et al. (1991). Preparing students with learning disabilities for postsecondary education: Issues and future needs. *Learning Disabilities: A Multidisciplinary Journal, 15*(1), 21-26.

MOBILE'S VOCATIONAL REHABILITATION SERVICES in TRANSITION

Ann Hilderbrand

Operating under the directives of the Rehabilitation Act of 1973, and as amended through the 1992 Amendments, Vocational Rehabilitation Service has a strong partnership with special education, school counselors, vocational education, and others to serve disabled students. As a part of the team, Rehabilitation helps bridge the gap between school and work by offering students a number of opportunities.

In order to insure that a vocational rehabilitation counselor would be available at each IEP meeting where a vocational rehabilitation client is concerned, we provide a calendar of vocational rehabilitation activities, in order to circumvent any errors in scheduling. Additional consideration was given to our ability to substitute for one another should the need arise. This was not a difficult task, as all the Rehabilitation Transition Counselors were involved with the initial meeting scheduled in early Fall.

If a student (at least 15 years old or in the 9th grade) is limited in his/her ability to work due to a physical, mental or emotional impairment, Rehabilitation may be able to assist the student in determining vocational potential, vocational planning, vocational training, and employment. Our purpose is to enable eligible students to achieve their maximum work potential. Our Transition Counselors do so through an individualized planned program of services.

Successful Rehabilitation starts with referrals from the local LEAs. The success is dependent upon an eligibility determination with the student's active participation in program development, implementation, and completion.

Pertinent and invaluable diagnostic information obtained during the eligibility process may be helpful in the development of the student's IEP/ITP. Therefore, Special Education personnel are encouraged to refer appropriate candidates to the Adult Vocational Rehabilitation Services Transition Team as early as possible in the academic school year.

Our Mobile County Transition Team for Adult Vocational Rehabilitation Services consists of three counselors assigned to the County and the 16 schools involved with the joint IEP/ITP meetings. The transition counselors are assigned to specific schools as follows: Mrs. Constance S. McRae, north Mobile County, Mr. Ralph Smith, south Mobile County, and Mr. Stan Walters, central Mobile County. In order to insure that a vocational rehabilitation counselor would be available at each IEP meeting where a vocational rehabilitation client is concerned, we provide a calendar of vocational rehabilitation activities, in order to circumvent any errors in scheduling. Additional consideration was given to our ability to substitute for one another should the need arise. This was not a difficult task, as all the Rehabilitation Transition Counselors were involved with the initial meeting scheduled in early Fall.

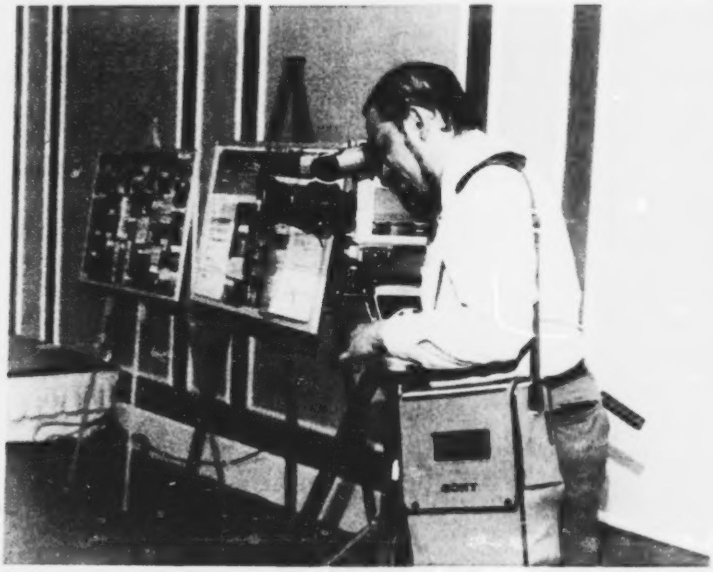
Early referrals to Adult Vocational Rehabilitation Services were encouraged from the Special Education Departments for each school. These referrals are processed upon receipt. The eligibility determination or process involved for Adult Vocational Rehabilitation Services basically consists of a completed referral Form which is an application completed by the client and his patents, and an eligibility determination made on diagnostic information received both through the school and other resources. An Individualized Written Rehabilitation Program (IWRP) is developed and reflects similar services to be provided through the school system.

Special Education personnel are encouraged to refer appropriate candidates to the Adult Vocational Rehabilitation Services Transition Team as early as possible in the academic school year.

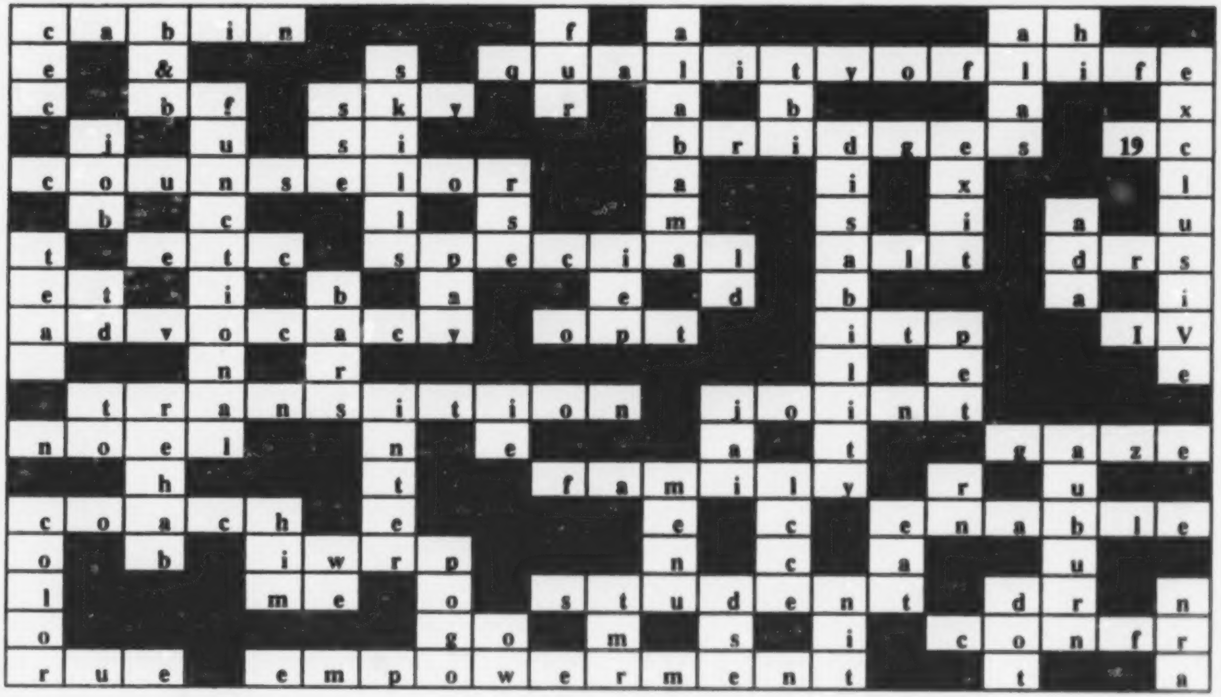
Ultimately, the diagnostic information and the Individualized Rehabilitation Program outlined are available for input into the development of the IEP/ITP. It should be noted that Individualized Written Rehabilitation Program Services are continued until transition is completed and may be rendered beyond the client's completion of high school.

For the Adult Vocational Rehabilitation Service's Transition Counselor, a positive outcome of the joint IEP/ITP meetings has involved our exposure to students and their parents who had previously been referred to Adult Vocational Rehabilitation Services, but had failed to pursue our assistance. Parents are provided an opportunity to meet the vocational rehabilitation counselor and to be given a general overview of our services. As a result, it is rare that an individual will not follow through with his or her referral after the introduction provided during the joint IEP/ITP meeting.

An area of concern is the occasional overwhelming of a parent by the number of professionals involved in their student's IEP/ITP meeting. It is the consensus of the members that this is an area that we will continue to work toward improvement as we go back to the "drawing board" in the Spring of this year and the Fall of next year. The opportunities for "brainstorming" has proven to be an excellent way to continue our improvement in this process.



BEST COPY AVAILABLE



c	a	b	i	n	■	■	■	■	f	■	a	■	■	■	■	■	a	h	■	■
e	■	&	■	■	■	s	■	q	u	a	l	i	t	y	o	f	l	i	f	e
c	■	b	f	■	s	k	y	■	r	■	a	■	b	■	■	■	a	■	■	x
■	j	■	u	■	s	i	■	■	■	■	b	r	i	d	g	e	s	■	19	c
c	o	u	n	s	e	l	o	r	■	■	a	■	■	i	■	x	■	■	■	l
■	b	■	c	■	■	l	■	s	■	■	m	■	■	s	■	i	■	a	■	u
t	■	e	t	c	■	s	p	e	c	i	a	l	■	a	l	t	■	d	r	s
e	t	■	i	■	b	■	a	■	■	e	■	d	■	b	■	■	■	a	■	i
a	d	v	o	c	a	c	y	■	o	p	t	■	■	i	t	p	■	■	I	V
	■	■	n	■	r	■	■	■	■	■	■	■	■	l	■	e	■	■	■	e
■	t	r	a	n	s	i	t	i	o	n	■	j	o	i	n	t	■	■	■	■
n	o	e	l	■	■	n	■	e	■	■	■	a	■	t	■	■	g	a	z	e
■	■	h	■	■	■	t	■	■	f	a	m	i	l	y	■	r	■	u	■	■
c	o	a	c	h	■	e	■	■	■	■	e	■	c	■	e	n	a	b	l	e
o	■	b	■	i	w	r	p	■	■	■	n	■	c	■	a	■	■	u	■	■
l	■	■	■	m	e	■	o	■	s	t	u	d	e	n	t	■	d	r	■	n
o	■	■	■	■	■	■	g	o	■	m	■	s	■	i	■	c	o	n	f	r
r	u	e	■	e	m	p	o	w	e	r	m	e	n	t	■	■	t	■	■	a

Crossword puzzle on page 139

BEST COPY AVAILABLE

A "GROUP ACTION PLANNING" COOKBOOK
for
FAMILIES--FRIENDS--PROFESSIONALS

Ann and Rud Turnbull

What is Group Action Planning?

Group Action Planning (GAP) occurs when a group of family, friends, community citizens, and professionals form a "reliable alliance" for the purpose of dynamically, energetically, and joyfully creating inclusion within families, neighborhoods, educational programs, and communities. The components include:

- **Inviting Support**
- **Creating Connections**
- **Sharing Great Expectations**
- **Solving Problems**
- **Celebrating**

How Can Families Create An Action Group?

Inviting Support

1. Identify someone to facilitate your group. The role of the facilitator is a key one because the facilitator makes sure all other tasks are carried out. The facilitator needs to be a person whom you can trust, is willing to make a commitment to being a part of a reliable alliance, has strong communication skills, and is able to connect verbally and emotionally with all group members.

2. Identify the family members, friends, and professionals who are already involved in your life. Think through how each has contributed to supporting your family. Identify your family's definition of helpful support.

3. Who are the two or three people who seem to have the most emotionally-connected relationship with your son or daughter? Are they available to join the group?

for a "living " example
read pages 55-64

4. What are your son or daughter's preferences? Who are the people who can create opportunities to those preferences?

5. What are your great expectations for your family and your son or daughter's future? What are the great expectations of other family members? Consider a couple of the highest priority great

expectations and think of the people who you already know and even those who you do not know who could help make those great expectations happen.

6. Think through the interests, strengths, and needs that might link your son or daughter and your other family members with a wider circle of supporters. (What are your son's or daughter's preferences? In what activities does your family participates in the community?) Develop an awareness of friends, extended family, community citizens, and professionals who may be able to support your son or daughter and your family to pursue your interests and strengths.

7. Issue invitations to join the group. Do this after you have considered a whole range of people. Invitations can come from your son or daughter, you, other family members, or the facilitator. One way to extend the invitation is to invite people to come to the first meeting to find out more about what is involved. By giving them a chance to participate in a meeting and meet others prior to making a definite commitment, you find them more information about what is involved. You also should tell then from the outset that, if action group participation does not work out for them for any reason, they can always withdraw from participation.

8. Let everyone know that people can join at any time. You may discover new people to add, as new issues and great expectations emerge.

Creating Connections

9. Let each individual know how valuable his or her support is. Affirm the positive contributions and strengths of everyone. If some people tend to "be on the fringe" of the group, seek ways to get them more involved and to help them be connected.

10. Create a sense of connectedness. Help people enjoy themselves, feel comfortable, and develop a sense that they, too, can derive support from this reliable alliance.

11. Listen for and celebrate the special events and occasions in the lives of group members. For example, when someone in the group experiences personal or professional success, acknowledge and celebrate it. When a sadness occurs in the lives of group members, provide consolation and support. Create a sense of caring for everyone in the group.

12. Create an informal atmosphere for socialization throughout the meetings. Have food available for snacking and refreshment. Arrange seating so that it is comfortable, e.g., people sitting in a circle in a living room or family room, as contrasted to sitting around a table.

13. Infuse laughter and joy into each gathering. Avoid somberness.

14. Turn a crisis into an opportunity. Experiencing a crisis can help a sense of reliable alliance when people have an opportunity to share disappointment, hurt, and frustration. Often families have been conditioned to keep their major worries to themselves and to conceal their biggest problems. When a crisis does happen, the more you share with the group and are open about your feelings, the more the group has an opportunity to respond and to create a sense of truly being a reliable alliance. Remember that every crisis is an opportunity for stronger connections and for more creative problem-solving.

Sharing Great Expectations

15. Encourage your son or daughter to share his or her own great expectations for the future. Share your own great expectations. From the first meeting, give other members of the group an opportunity to affirm and even embellish these great expectations by beginning to develop "What if" and "why not" attitudes. Avoid allowing disability to push you into less than full citizenship.

16. Listen for the expression of others' great expectations and acknowledge and underscore those when they are shared.

17. Recognize that great expectations evolve over time. The great expectations that you and others have at the beginning may seem like only moderate expectations at a later time. Thus, the unfolding of expectations should be viewed as an exciting and dynamic process.

18. Seek to stay open to ideas that truly push the limits of possibilities. Encourage seemingly outlandish thinking. Hold back from dismissing options simply because you've never heard of a person with a disability who has had success with the option. Embrace the opportunity to be a pioneer.

Solving Problems

19. The facilitator has a key role in guiding the group through the steps of systematic problem solving. The beginning of the process requires focusing on a particular great expectation and specifying what needs to happen for that expectation to be realized.

20. Do dynamic brainstorming. Encourage everyone to freely brainstorm without the feeling that their ideas will be censored or immediately evaluated. One of the key contributions of having diverse membership in the action group is to broaden the range possible options that are identified and considered. Thus, brainstorming should be a highly open and creative process.

21. Consider the specific options that are most likely to be successful in addressing needs and barriers and in building on strengths. Do a careful analysis of the pros and cons of different options.

22. Select the most appropriate options and delineate a specific action plan. This action plan should identify the people who are going to take next steps, the specific actions that they will take, the timeline for accomplishing the steps, how the group can be supportive, and when a progress report should be made to the group. The responsibilities for follow through need to be spread across different group members and involve people who are not in the group, as long as group members can help with coordination and communication with those people. One of the key components of action groups is the action steps that happen between meetings in getting tasks accomplished in order to help great expectations be realized. Thus, people need to leave the meeting with a clear understanding of what they need to do and a commitment to get it done on the timeline that has been specified.

23. Promote systematic problem solving in a way that is participatory, creative, dynamic, and organized. A facilitator will be far more successful in the role if she or he has experienced success in individual and group problem solving in the past. Facilitators need to have a balance

between structure and rational problem-solving, on the one hand; and warmth, openness, and flexibility, on the other hand. They need to create synergy within the group with the belief that practically anything is possible by working together collaboratively-a sense that "the whole is greater than the sum of its parts.".

24. Set a comfortable pace and seek to make progress at every meeting and in implementing the action plans between meetings. Point out the good things happening in the child's life because of group efforts. Progress is essential to keep motivation high.

25. Get everyone involved. Direct specific questions to the individuals who are not having a chance to participate and either directly or indirectly communicate to the people who are dominating the process that others need to have a greater turn.

26. Limit your efforts. Systematic problem solving can only be accomplished on one or two issues during a meeting. One mistake that some people make is to try to work on too many things simultaneously. By focusing on one or two issues and developing a systematic specific plan, great progress will be made over time. Thus, the facilitator needs to keep the group directed on what is manageable to accomplish during a given meeting.

27. Summarize. Every meeting should end with a clear summary of the action steps that need occur before the next meeting.

Celebrating

28. Celebrate progress. Every meeting needs to have opportunities to celebrate progress. The facilitator needs to model and other group members will quickly join in affirming progress, strengths, and positive contributions.

29. Allow and encourage gratitude. It is very important for your son or daughter and you to let people know how much their support is appreciated and how good you feel about the progress that is being made.

30. Eat and drink. Special snacks can be added to the meetings as an element of celebration. This might include a birthday cake for some group member, a special menu that consists of people's favorite foods, or some seasonal remembrance such as Valentine candy for everyone.

31. Develop the "joy quotient." Set aside time to "party" rather than to "problem solve." Create opportunities characterized totally by frivolity and enjoyment. All different kinds of diverse ideas can be considered from having a chance for people to attend together a community recreational event, sing along with a group member who plays a guitar, have different group members put on an impromptu talent show, or have a cook-out in the backyard. The key is that people are having fun together, feeling positive about the great expectations that are getting put into place, and deriving a sense of connection and nurture from each other.

32. Participants should leave meetings feeling renewed rather than depleted.

TRANSITION IV's KEYNOTE ADDRESS

Group Action Planning as a Strategy of Moving from Old to New Horizons in Transitional Planning

Ann P. Turnbull and H. Rutherford Turnbull, III

During the last seven years of our families' life, we have been intensively involved in supporting our son, Jay, to transition successfully from high school into an inclusive adult lifestyle. Through our own family experience, in addition to our professional roles as special education professors with an emphasis in family support and collaboration, we have experienced both failure and success with transitional planning. In this paper, we will share with you our learning process in moving from old to new horizons through the strategy that has helped us -- Group Action Planning.

Jay--Old Horizons, 1987

Jay was one of the first generation students of P.L. 94-142. Throughout his school career, he most always attended special classes. He was typically physically present in regular schools but highly socially excluded from the life and activity of the school. The high school in our community contracted for the secondary students to attend a sheltered workshop for half of each school day. It was an automatic assumption for students to graduate into segregated employment, segregated housing, segregated transportation, and segregated recreation. We have characterized that lifestyle as the "herd mentality", because adults with disabilities always move from one setting to the next in large groups often without regard to their individual preferences. Progressive transitional planning was not a hallmark of our family experience.

After months of intensive advocacy in trying to work with the adult agency--the only one in town that serves adults with disabilities--we faced the inevitable. We withdrew him from the program just as the administrators were ready to expel him. We made this decision with a determination to create a service model in our community that was characterized by interdependence, empowerment, and productivity.

During Jay's last couple of years in high school, we talked frequently to his teacher, the district's special education administrators, and the adult program administrators about supported employment models that were being described in the literature. Their response was that we were "unrealistic" and that we had not accepted the extensiveness of Jay's disability. They asked us why we thought Jay should get special treatment when he was the lowest functioning student in the class, and all of the students much more capable than he were going to the sheltered workshop. We responded by saying, *"We don't think he should have special treatment. We think all the students should be prepared for supported employment."*

But Jay did transition into the sheltered workshop and group home and, in spite of our best efforts as members of its Board of Directors, we found it impossible to redirect the agency's efforts toward a state-of-the-art model. Within months, Jay experienced profound frustration and alienation as his life became increasingly segregated and his activities increasingly herdlike. He started hitting, choking, pulling hair, and refusing to get up in the morning. His behavior was saying loudly and clearly what he was not able to articulate in words: *"I'm lonely. I'm afraid. I don't feel valued and respected. I feel like a second-class citizen. I'm not getting the support that I need to do the best that I can do."*

After months of intensive advocacy in trying to work with the adult agency--the only one in town that serves adults with disabilities--we faced the inevitable. We withdrew him from the program just as the administrators were ready to expel him. We made this decision with a determination to create a service model in our community that was characterized by interdependence, empowerment, and productivity. When we talked with the traditional agency Director about our future plans for Jay, his parting question was, *"What are you going to do when you fail?"* What he was really telling us is that he ran the only program in town; that our names would be at the bottom of the waiting list; and that we would have to work our way back up to admission. That was the period characterized by old horizons--1987.

Jay--New Horizons, 1994

We will briefly highlight the major components of Jay's adult life:

> **Job.** Jay works 30 hours a week at the University of Kansas as a clerical aide. Yes, we as his parents helped him get that position; but this is not unlike the strategy that many people without disabilities use. Many of us get jobs through our network of family and friends. Jay makes more in a month than he would have made in the sheltered workshop in a year, has had only one incident of aggressive behavior at work in the last six years, and works within a caring network of coworkers who like him, believe in him, and help him advance his skills.
>
> **Home.** This is Jay's fifth year of living in his own home--a home that he is buying with his own salary. He shares his three-bedroom home with two university-student roommates--Tom and Greg. In exchange for rent and utilities, his roommates each provide him about 12-15 hours a week of personal support in helping him learn new skills, coordinate his schedule, and experience enjoyable and emotionally-corrected companionship.
>
> **Transportation.** Rather than riding the disability-only van, Jay walks down to the corner of the block and catches the city bus which takes him to campus. Once he gets to campus, he walks a complicated route through a couple of different buildings and down a steep hill in order to get to his job. Never in our wildest dreams did we think he would be able to do this by himself, particularly during about a 12-month period when someone always had to be with him because of the unpredictability of his aggressive behavior.
>
> **Friends.** The most exciting aspect on Jay's life is that he is surrounded with caring and enjoyable friends. Each week, he hangs out with approximately 12-15 different people during different times of the week, and all of these relationships are sources of

enjoyment, self-esteem, and community participation. For a young man who never had a friend his own age until he was 21 years old, he is making up for lots of lost time.

Community Participation. One of Jay's first introductions to inclusion was getting involved with a university fraternity about six years ago. From that beginning of having a place to hang out and having an opportunity to attend parties and special activities, Jay has branched out in lots of ways in the community. He has many "cheers" connections--places he goes where everyone knows his name including the bakery, a jazz club, restaurants (especially ones with live music), our church, to a grocery store, and a fitness center. A key aspect of Jay's life is that he goes around the community as an individual, rather than as a member of a herd. There are lots of people who are invested in his success and look out for his interests when he needs some extra support.

Some people have the mistaken idea that transition happens in a short period of time--perhaps a couple of years. We have learned that, on the contrary, creating an inclusive lifestyle anchored within the community takes an incredibly long time. Our challenge--and indeed, the challenge of most advocates--is not that it takes that long to prepare the person with a severe disability; rather, it takes that long to prepare the service system that is severely restricted by its traditions and bureaucracy.

Components of Group Action Planning

We really had no choice but to devise a radically different approach to transition planning, since being part of the only adult agency in town was not an option. We did what everyone does when they're down and out, which is to rely on the informal network of family and friends. We started out very informally, but over the years we evolved into using a process that we now call **Group Action Planning**. Group Action Planning occurs when family members, friends, and professionals create a reliable alliance with each other for the purpose of creating a different vision about what life can be when one has a disability--a vision characterized by full citizenship.

We really had no choice but to devise a radically different approach to transition planning, since being part of the only adult agency in town was not an option. We did what everyone does when they're down and out, which is to rely on the informal network of family and friends. We started out very informally, but over the years we evolved into using a process that we now call Group Action Planning. Group Action Planning occurs when family members, friends, and professionals create a reliable alliance with each other for the purpose of creating a different vision about what life can be when one has a disability--a vision characterized by full citizenship.

The two fundamental characteristics of Action Groups are that they (a) create a context for social connectedness and interdependent caring; and (b) through the social connnectedness, engage in dynamic and creative problem solving. The idea is to build a network with people who are passionately committed to the individual with a disability. These people include nuclear and extended family members, friends, community citizens, and professionals. The network is brought together on a regular basis to envision and create a lifestyle that is consistent with the preferences of the individual with a disability. Rather than being agency or professionally directed, Action Groups are first and foremost directed by the preferences of individuals with a disability and families. Members boldly view the world as it has never been and ask, *"Why not?"*

We have characterized **Group Action Planning** as having five major components including:

- **Inviting support**
- **Creating connections**
- **Envisioning great expectations**
- **Solving problems**
- **Celebrating success**

Inviting Support

School and adult professionals have dominated transitional planning. On the contrary, we have learned through Group Action Planning that the people who make the very most difference for transition over time are the individual with a disability, indigenous community citizens, the friendship network, and a broad array of family members. As I described Jay's community participation earlier, it is the people who work at the bakery, the regular patrons of the jazz club, the check-out clerks at the grocery store, the waitpersons and musicians at restaurants, members of the church congregation, and the other participants at the fitness center that ultimately determined Jay's community inclusion far more than his secondary teachers or vocational rehabilitation counselor.

Thus, Group Action Planning starts by considering the preferences of the individual with a disability and then explicitly inviting into the group people who can help those preferences be actualized. For example, Jay's favorite pastime is music, so it has been essential to have musicians in his Action Group who are including him in our community's music scene.

We had lived in Lawrence for eight years before we actively invited support. It has been amazing to us what natural and potent resources were surrounding us for all of those years that were all dormant, because simply we had not invited them to that part of our lives. We have particularly learned that there are key people who are door openers to different aspects of the community, and it is essential for us to find those people who, in turn, can put us in touch with a whole network of others. For example, one of Jay's Action Group members teaches music therapy at Kansas University. She has access to about 30 students every year, and she has helped arrange incredible opportunities for Jay to have companionship at community musical events and for her students to enjoy their friendship with him and to extend their classroom learning.

One of the particular challenges of families who are facing transition is that they have been conditioned for their whole lives to assume almost sole responsibility for their family member, to not impose on others or expect their help, and generally to live on the fringe of community life. Action Groups have the major challenge and opportunity to expand transitional planning from just professionals and family to the rich arena of community participation. Specific ways to support families include:

- Brainstorming with them about which friends and community citizens might be asked to participate;

- If the families feel uncomfortable issuing the invitation, asking the friends and community participants on behalf of the family;
- Pointing out the benefits that the participants get so that the families will not feel as if they are imposing; and
- Helping to ensure the successful experiences of community participants so it's likely that the family will continue to reach out for support.

Creating Connections

Reflect on the IEP and ITP meetings that you have attended. What is the ambience of those meetings: How do people relate to each other? Are people emotionally connected or does there tend to be at least some tension and distance? As contrasted to the typical individualized team meetings, a teacher who attends an Action Group for a junior high student in our community commented he couldn't decide if he was going to a meeting or a party. One thing we can probably all assert is that no one ever mistook an IEP or ITP meeting for a party.

Group Action Planning places strong priorities on creating social connectedness among all group members and also creating emotional connectedness between each group member and the individual with the disability.

In terms of creating the social connectedness within the Action Group, key considerations include:

- Holding meetings in people's homes rather than in professional settings;
- Telling stories about the person's past and hopes for the future rather than relying on test scores or formal reports;
- Providing food and opportunities for visiting before and after meetings;
- Looking for ways to enhance benefits for everyone in terms of self-esteem, gratification in making a difference, professional benefits, and responding to each member's personal needs; and
- Embracing crisis as a time for group solidarity in sharing both the pain of problems and the triumph of overcoming them.

It's a given that almost everyone--professionals, friends, community citizens and family--are tired and over-extended from multiple responsibilities. Thus, a key in Group Action Planning is to create a context where people can enjoy themselves, feel a sense of renewal and rejuvenation, and a heartfelt sense that they are making a difference in someone's life. There has to be enough personal rewards created for each person that it is worth their valuable and limited time and energy to invest in this process which usually is outside of the typical working day.

It's a given that almost everyone--professionals, friends, community citizens and family--are tired and over-extended from multiple responsibilities. Thus, a key in Group Action Planning is to create a context where people can enjoy themselves, feel a sense of renewal and rejuvenation, and a heartfelt sense that they are making a difference in someone's life.

In addition to creating social connectedness, it is also critically important to enhance a sense of emotional connectedness--not only to the individual with the disability and the family, but also to all group members. In terms of the individual with the disability, group members can be supported to know how to:

- Best interact with the individual so that the relationship moves beyond a superficial level to a more intimate level of emotional connectioness;
- Acknowledge the individual's preferences and strengths so that those can be the basis for relationships and for transitional planning; and
- Encourage the individual to express positive and negative feelings and to carry on reciprocal conversations to the extent that is possible.

For example, we found that as family members we know certain techniques that work with Jay to help him feel especially connected to others. Rather than each new member coming in having to figure those out by trial and error, we would easily share examples in the Action Group so new members could observe and quickly pick up on them. Also, many meetings start by everyone stating something positive about Jay that they particularly appreciate. This helps everyone get to know his strengths so that they can build on those, and it is a powerful experience for Jay to hear so much positive feedback.

We also found that outside of the Action Group Jay needed to work specifically on his conversational skills and also on learning information that is relevant to each of his group members, such as the names of their pets or their hobbies. The more he can learn information that would help express interest in them, the more he can be reciprocal in the relationship. There has not been nearly enough attention paid to relationship building for people with disabilities, and it is an essential component of an inclusive adult lifestyle.

Sharing Great Expectations

One of the biggest barriers to confront in transitional planning is the low level of expectations that all people have had for individuals with disabilities over the last 20 years. By the time students with a disability get to high school, their families bring the "baggage of societal influences"--the implicit assumptions of life-long dependency. Thus, many people are conditioned to believe that a typical job is absolutely unrealistic.

It's essential in Group Action Planning for there to be a sense of at least some great expectations for what the future might hold. In fact, from our experience, it appears that Action Groups work far more effectively when the expectations tend to be high. The challenge of reaching goals that many people foresee to be unreachable seems to provide an element of motivation for group members to "beat the odds."

Increasingly, there is a great deal written about the importance of visions in future planning. In our own Group Action Planning, we found that great expectations grow in ever increasing circles. It would have been absolutely impossible for us to have envisioned seven years ago how really good life is for Jay today. In fact, gradually, in an evolutionary fashion as one goal was reached our expectations for others became possible to imagine. One of the most critical aspects of having great expectations is to avoid situations of feeling totally overwhelmed by the thousands of things that need to be accomplished. Thus, an ingredient for success is to seek to the extent possible to see the forest as well as the trees--to be able to picture what the most desirable lifestyle would be in terms of the forest, but then to be able to focus on smaller groups of trees so that the task is not so overwhelming.

In regard to great expectations, in Jay's group we found that is was essential to involve people who tended to see the cup half-full rather than half-empty. In inviting support, it's important to not surround yourself with nay-sayers but rather to invite people who are willing to work hard to achieve what many people might think impossible.

Solving Problems

A key attribute of Action Groups is that they focus on creative problem solving. As contrasted to traditional team meetings, where many decisions have actually been made in advance of the meeting and the discussion at meetings tends to be to review these already established decisions, Action Groups are absolutely open in terms of assuming that anything is possible. The group facilitator has a critical role in leading the group through steps of problem solving, including (a) analyzing preferences, strengths, and needs, (b) brainstorming a wide range of options, (c) carefully evaluating each option, (d) selecting the preferred option in developing a detailed action plan, (e) implementing the plan, and (f) evaluating the outcomes of the plan. It is essential to create a problem solving atmosphere in which everyone is open to full inquiry into all options. All people of the group have equal opportunities for participation, and there is a commitment to create win/win outcomes.

When there is diverse membership--especially when there are friends and community citizens participating--there becomes a whole new pool of diverse resources and options for solving problems. A key effort in groups is how each person can compliment the efforts of others so that as many different bases as possible are covered.

In Jay's Action Group, we have dealt with very large problems that require systemic change, as well as smaller challenges that primarily involve learning new skills (e.g., learning to shave, learning to ride the city bus, finding new roommates). In terms of the larger systemic issues, Jay went where he once again started engaging in some aggressive behavior. We realized at that time that there was a great deal of work that needed to be done to teach him skills of expressing his insecurities. We also needed to establish a highly predictable schedule and to expand the quantity and quality of rewarding relationships. Although his neurologist was strongly advocating that he take a new psychotropic drug in addition to the medication that he was already taking, the Action Group opted for a highly consistent, systematic, and 24-hour positive behavioral support plan (and the elimination of all medication) consisting of:

- Implementing a behavior management plan that clearly specified his responsibilities and the rewards that he would get from the time that he got up each morning to the time he went to bed at night as he interacted in every environmental domain.
- Communicating among roommates, family, job coach, and friends so that all of the people in his life would implement the behavior management plan in a consistent manner.
- Expanding the numbers of people in his social network and the emotional connection with every network member.
- Providing Jay with consistent notice of schedule changes and a back-up system of activities to put into place when these changes occurred.
- Training on how to handle change with confidence rather than with anxiety.
- Training on learning to express his preferences verbally and to assert himself when other people are not honoring his preferences and training of his social network members to listen, reinforce, and respond.

- Training to express negative emotions such as worry, frustration, anger, and fear and training of his support network members to listen, reinforce, and respond.
- Desensitizating Jay to long, black pony tails which he tended to pull when he experienced intense feelings of worry, frustration, anger, and fear.
- Training of all social network members on warning signals of aggressive outbursts, how to respond to warning signals, and what to do if an outburst occurred.
- Support for all social network members in learning to not be so worried about the dangerous behavior that might happen and to focus instead on success and strengths.

Attending to all of these tasks was more than three full time jobs, and yet everyone in Jay's Action Group had multiple other responsibilities. What unfortunately happens is that many families get so overwhelmed by what needs to be done that they give up on doing much of it al all. A highly supportive aspect of the Action Group for us was that as parents we did not have to initiate, plan and implement all of these interventions ourselves. With two jobs where we each work more than full-time and two other children besides Jay, not to mention our other roles and responsibilities, it would have been too overwhelming for us to have created Jay's inclusive adult lifestyle on our own. Rather, working over about a three-year period with the help and contribution of every single Action Group member, all of the tasks have essentially been accomplished, and yet all of them continue to need realignment, monitoring, and recycling. What we have essentially learned is that although the intensive period of transition finally does come to somewhat of an end, we will be needing to monitor and re-instigate this training for the rest of our lives with Jay; and it will need to be continued even after we die. It is an awesome responsibility to truly seek an inclusive lifestyle for individuals with cognitive impairments and challenging behavior.

One of the best aspects of Action Groups in terms of problem solving is that the critical people are there across all of the different environments in which the person participates. Thus, there can be coordination, sharing of responsibility, and a sense of support that everyone's needs will be considered. At the end of every meeting, it's critically important for there to be a clear action plan of the specific steps that need to happen before the next meeting and a designation of who is responsible. If every member of the Action Group leaves with one task to accomplish, then there can be approximately 10-14 different tasks accomplished without anyone feeling overwhelmed.

One of the most successful aspects of the Action Group for us has been a consistent feeling of synergy within the group where there is a powerful sense that the *"whole is truly greater than the sum of the parts"* and that the group energy and creativity supersedes what any individual could generate alone.

The concept of synergy is hard to put into words. It might be helpful for you to reflect on times when you have been in a group of people in which you truly felt transformed from your individual ability to create change to being part of a movement or wave that is unstoppable. That rush of possibility and empowerment is a renewing experience and one that truly transforms great expectations from visions into lifestyle options.

Celebrating Success

One of the unfortunate aspects of many traditional team meetings is that there is relatively ever an opportunity for celebrating and that the atmosphere tends to typically be one of somberness and seriousness. A key aspect of Action Groups, on the other hand, is to take every occasion for celebration in terms of affirming progress, allowing and encouraging gratitude, and setting aside time to "party" rather than to always "problem solve."

One way to celebrate is to have parties, and that is something that we have done very frequently over the last seven years. There have been opportunities for birthday parties, potluck dinners, and just times to have fun together. A typical approach is for Jay to dictate the invitation so that it is clear that it comes from him and that he has an opportunity to be a host. One of the most memorable parties was a couple of years ago just before Easter weekend when Jay sent out an invitation to friends in which he told them that he would provide taco shells, margaritas, and Mexican beer, and everyone should bring a filling for the tacos.

He distributed invitations to all of the people who were part of his wonderfully rick social network, including some of the guys at his Sigma fraternity. He gave the invitation to several of his closest fraternity brothers, but then he decided to take another giant step without letting his parents or his roommates know. He was at the fraternity house for dinner the evening before the party and indicated to them the special treats that we would be providing. Because most people don't offer a whole fraternity house of guys all of the margaritas and beer they can drink, you can only imagine how many people wanted to join in this grand celebration.

There are typically too few opportunities in transitional planning for fun and for poignant renewal of commitment, and therefore, the aspect of celebration is a critical component of Group Action Planning.

When the party started at 6:30 the following evening, it seemed the ordinary course of events when the first six or eight guys showed up. But when the number got up to be 20, 30, 40 and over 50, Rud and I kept looking at each other totally aghast. Although Jay was thoroughly delighted, it was obvious to us that there was no way the tacos were going to hold out. Our immediate solution was to order ten large pizzas for emergency immediate delivery and to buy another five cases for beer. It's an understatement to say that we will never forget the celebration that we had that evening. We knew we had come a long way from having no friends to having so many to join in the celebration that it took ten large pizzas and five additional cases of beer to keep everyone in food and drink. Symbolically, it was a "resurrection" for Jay on Easter weekend.

The other aspect of celebration is to occasionally take opportunities at meetings to go beyond the ordinary to affirm the power and contribution of the group. At one of our recent Action Group meetings, we gave everyone there a candle and began the celebration by lighting only the candles of family members and showing the limited amount of light that could be generated if it was only the family light that was burning for Jay. Then, by going around the circle and having everyone light their candles, the vibrant blaze signified the light that could be created for Jay's life by everyone working together in a synergistic way. The meeting ended by Jay signing *"This Little Light of Mine"* as a way of celebrating the progress that everyone had made by working together.

There are typically too few opportunities in transitional planning for fun and for poignant renewal of commitment, and therefore, the aspect of celebration is a critical component of Group Action Planning.

Summary

In summary, Jay has gone from a segregated and dehumanizing lifestyle to an opportunity for full citizenship as an employee, homeowner, friend, and community citizen. The major message that our family has learned is that the most successful way to accomplish transitional planning is through truly building a reliable alliance among professionals, families, friends, and community citizens where there is an opportunity for social connectedness and creative problem solving. Anthropologist Margaret Mead said:

> ***"Never doubt that a small group of thoughtful, committed citizens can change the world; indeed it's the only thing that ever has."***

We certainly found that to be true in our family's life, and we urge you to give it a chance as well. If the Action Group approach seems to have merit to you, it is easy to start toward a new and different future. Identify the family of one teenager--just one--and invite them to work with you to start an Action Group. Our challenge is to transform transitional planning from a bureaucratic process where people with disabilities transition into out-moded service delivery options, to a dynamic process, where they have a life what we, too, would want to live if we were in their shoes.

INCLUSION: ONE PARENT'S STORY

Susan Statum [1]

My two youngest children have severe disabilities. Bill is 18. He has been in a class for the profoundly mentally retarded, multi-handicapped since he was three years old. Before that he was in early-intervention for two years. He had a number of creative, enthusiastic, optimistic teachers and therapists. A lot of folks have worked for a lot of years at great cost to help him overcome his many physical and mental disabilities. They have not been successful.

Looking back I can see that over 10 years ago we, the members of the Bill Statum individual education planning (IEP) committee, gave up on the possibility of that ever happening. We have all known that no amount of money or effort on our part was going to result in an adult who was good enough to be acceptable to the community. When he was five years old and first placed in public school in the "pmr" (profoundly mentally retarded) room, it was implicit in that placement that Bill was a hopeless case.

One of the most painful parts of my job as a parent has been to attend these IEP meetings. To sit and listen - as one after another of the other participants (teachers and therapists) describe Bill's deficiencies and the almost minuscule progress that he has made from year to year - has always left me feeling sad and hopeless. For that one day each year, I see Bill as I know other people see him and not the unique person I live with and know and love.

To sit and listen - as one after another of the other participants (teachers and therapists) describe Bill's deficiencies and the almost minuscule progress that he has made from year to year - has always left me feeling sad and hopeless. For that one day each year, I see Bill as I know other people see him and not the unique person I live with and know and love.

I can't describe how I felt when I realized that my daughter, Anna, who is 7 now, had the same disabilities that Bill has. A friend of mine said at the time, *"It's the second time for you, that must make it easier to accept."* She was wrong. It was much harder to accept the second time around. Nevertheless, I did the only thing I knew to do. I enrolled Anna in an early intervention program as I had Bill. Nothing had changed in 11 years. Some of the equipment was new and store-bought but it served the same purpose as the homemade equipment we used 17 years ago. There were a few new communication devices, but everything else was the same: the methods, the therapy, worst of all the philosophy, unspoken but clear. *We're going to fix this little girl. We're going to do therapy on her and show you, Mom, how to do it. And if you work hard enough she's going to get better and better and one day she may be good enough.*

The trouble was that I'd been down that road before and I knew where it ended, in a class at the end of the hall, near an outside door, at the back of the school. It led to a special separate lonely boring life, maybe to an institution, and I could not accept that on behalf of another child who depended on me. I

---

[1] Susan Statum is a Birmingham resident and the mother of four children. This story appeared in *Child Times of Alabama* (April 1994) and is reproduced here with permission.

And this brings me to my final point. Full inclusion affords children with disabilities an opportunity given to other people: to live a meaningful life. I know that every day Anna spends in an integrated environment is a meaningful day. Every transaction she has with another child counts for something. Every day she is teaching lessons that no one else can teach. She is bringing out the best in others who bring out the best in her. She deserves that opportunity, and so to they.

knew that if Anna were not good enough just as she was, then she never would be.

The despair I felt during these early years brought me to make an important decision when Anna was 4. I decided to abandon those futile efforts to change her into something she was not. Not by abandoning the therapy she needs to maintain her health and to make life's daily tasks easier for her, but to lower their priority. I decided that it was more important for her to live as normal a life as possible right then, not as some hypothetical time in the distant future, a time I knew would never come.

I withdrew her from the special center she had attended for several years and enrolled her in a Head Start program. Anna was the only child in her class in a wheelchair, the only one who couldn't speak. The teacher had never taught a child with severe disabilities before. That first morning when we came rolling into that room full of noisy, active 4-year-olds, the teacher said to me, *"Go home and don't worry; everything will be fine."* And it was. Whatever problems we had, we worked out together. By year's end, Anna was beginning to speak. And I learned that it doesn't take a special person to teach children with disabilities. It simply takes a special person to be a good teacher.

Ideas and Hope

Three years ago, I attended a University of Alabama at Birmingham conference that changed my life. The subject was "Integrating People with Severe Disabilities Into Normal Society" and the speaker was Dr. Lou Brown, University of Wisconsin. When I walked into the auditorium that day, I was sure that Dr. Brown must be referring to people with severe physical disabilities, but I was wrong. When I left late that afternoon every notion I had about my children's place in the world had been brought into question, and for the first time in more than a decade, I felt hope for them and their future lives.

It turned out that the children he was talking about were children with severe mental as well as physical disabilities. He brought slides and in those slides I saw my own children being educated in their neighborhood school's in classrooms with normal students.

Two ideas in particular impressed my that day.

> ***"There is nothing that can be taught in a segregated classroom that cannot be taught in a regular room. But there are many things that can be taught in a regular classroom that cannot be taught in a segregated room."***
>
> ***"The more severely disabled a child is, the more important it is to educate them with their normal age-appropriate peers."***

From my own experience I knew that these statements made sense. Many more interesting things happen in a regular classroom than in a room for the profoundly mentally retarded. In the special class, as much as half the school day is spent eating, pottying, getting off the bus, getting ready to work, and getting ready to go home. The other half is spent working on certain specific goals that are geared down to the perceived learning level of the child. In a regular class there is a wide curriculum with many more learning activities and a richer variety of experiences. The child with or without disabilities has the chance to surpass expectations, and often does.

Since that day in 1991, I have been fortunate to experience the benefits of full inclusion through Anna and to appreciate the profound difference it can make in a child's life. It is in fact a completely new way of educating children with disabilities. It flies in the face of all preconceived notions about these children, notions at the heart of prejudice.

Learning from others

In a "special" room, the only peer models are other children who have disabilities and the adults. We all know that kids learn a lot from each other. Generally, what kids with mental retardation learned from each other is how to behave like kids with mental retardation. My own son has learned to hit his head with the heel of his hand, to bite himself, to pinch other people. A few years ago he even learned to drool, something he had never done before. In a regular class, certain behaviors are not tolerated: kids are not allowed to be loud and disruptive. If a child can actually learn to behave like the stereotype of a person with mental retardation, he can learn to behave in a socially acceptable way.

Since that day in 1991, I have been fortunate to experience the benefits of full inclusion through Anna and to appreciate the profound difference it can make in a child's life. It is in fact a completely new way of educating children with disabilities. It flies in the face of all preconceived notions about these children, notions at the heart of prejudice.

If a child with special needs can be educated in a regular classroom then why not serve them there? Why not bring the special services to the child instead of consolidating kids whose disability is that their IQ is between 30 and 50 in a separate room? Because it is easier for the school system? Because that's the way it's always been done? Because kids who have mental retardation have to be protected from the rest of us (you know how cruel kids can be)? Because they can't keep up and belong with their own kind?

That's not good enough; what is easy, familiar, comfortable and convenient for a school system isn't what's best for my child. It's past time to stop excluding children with disabilities from our communities and schools.

Anna's Acceptance

Anna is now in first grade. A few weeks ago her teacher told me how impressed she is with the other children's eagerness to help Anna. I have personally observed their kindness and gentleness toward her. In my desk, I keep a dozen little love notes they have sent home in her backpack.

And this brings me to my final point. Full inclusion affords children with disabilities an opportunity given to other people: to live a meaningful life. I know that every day Anna spends in an integrated environment is a meaningful day. Every transaction she has with another child counts for something. Every day she is teaching lessons that no one else can teach. She is bringing out the best in others who bring out the best in her. She deserves that opportunity, and so do they.

Over the years I have often heard that parents must learn to accept the fact that their child has disabilities. I know no parent who hasn't accepted their child's disabilities. When you get up in the morning and force your child's legs into braces, put them in a wheelchair, feed them breakfast, give their anti-seizure medication, you have accepted and are dealing with your child's disability.

There is a hitherto unknowledged place in the world for our children and we need to claim it. The current movement toward full inclusion gives us a hope that no other generation of parents of children with disabilities has had; the hope that when our children are grown they will be accepted as full members of the human community. We are luckier than we thought.

When people speak of acceptance, they imply that parents must learn that their child's disability prevents them from having all the things normal people have, that these children can't be a real part of our society. They must be separate even though it is bad and painful. But it isn't the job of a parent of a child with disabilities to accept things the way they are. It is our job to do anything we possibly can do to change things.

There is a hitherto unknowledged place in the world for our children and we need to claim it. The current movement toward full inclusion gives us a hope that no other generation of parents of children with disabilities has had; the hope that when our children are grown they will be accepted as full members of the human community. We are luckier than we thought.

PROBLEM ASSESSMENT OF FAMILY INVOLVEMENT
in
TRANSITION

Rebecca Curtis, Cheryll Glisson, and Robert Beadles

One of the most basic obligations for schools includes communicating with parents about the school's programs and their children's progress. Parents are encouraged to actively participate in the development of their child's IEP/ITP's (Aune & Johnson, 1992). Problems in communication between schools and parents arise from differences in interests, needs, and focus.

Family involvement encompasses many aspects that contribute to a comprehensive program of school and family partnerships. Parental involvement, for example, is linked to creating a more positive learning environment, reducing the risk of student failure, and increasing student success (Epstein, 1987).

Parental involvement is linked to creating a more positive learning environment, reducing the risk of student failure, and increasing student success.

Cooperation by all parties involved for a sustained time period will encourage parental involvement and understanding. Types of parental involvement that can lead to improved school-family relationships include: (a) parents-as-partners, (b) parents as collaborators and problem-solvers, (c) parents as an audience, (d) parents as supporters, and (e) parents as advisers and co-decision makers (Lindner, 1988).

In an effort to identify and assess problems associated with family involvement in the transition process, professionals and parents of children with disabilities were brought together at the fourth annual conference on Transition in Alabama. Utilizing a system's method (i.e., Nominal Group Technique) that allowed for problem and solution identification, the group explored prevalent issues concerning family involvement in transition. Professionals in special education, vocational education, and rehabilitation, as well as consumers, families, and other interested parties were represented. The purpose of this paper is to present information gathered during the open-forum concerning the problems and potential remedies involving the transition process, as viewed by both professionals and parents.

Method for Problem Identification

The Nominal Group Technique (NGT), developed by Van de Ven and Delbecq (1972), was used as the exploratory method to determine the area of family involvement in transition. The intent of applying the NGT is to: (a) generate individual input from the work group, (b) promote "group thinking", and (c) prioritize the problems and provide workable solutions (Browning, Lehman, & Rhoades, 1983). This consensus-building process allows all participants to vocalize individual areas of concern and generate resolutions equally. The NGT is applied in four stages--silent problem generation, public display of problems, problem discussion, and problem ranking and prioritization.

Session #1

The first session was devoted to the **identification** of transition problems with respect to the parent's role and involvement. Participants were instructed to individually list their perceptions of the top five problems associated with family involvement in transition. The total group identified 30 problem areas in this work session (see Table 1).

Also, attendees during this first session ranked their perceptions of the top five problems of the 30 problems generated (with #1 being the lowest and #5 the highest) (see Table 2). Scores were tallied and weighted in order to prioritize these five problem areas. Of the 58 attendees, 51 provided responses for data analysis.

Session #2

Session #2 was designed to provide a forum for the **solution**(s) to the identified problems. There were 32 persons in attendance at the second session, with 22 having participated in Session #1. Group discussion of identified problem areas focused on what could be done to solve the problems.

Responses to the first two problems (see Table 2) were so enthusiastic that only these areas were addressed given the time limit. In fact, such interest was generated that an additional session was requested by participants. The group facilitators continued the discussion in relation to strategies of the problems identified. Additionally, the group explored perceived attitudes that are exhibited by professionals and families and their relationship to the problems and solutions of family involvement in transition.

Results

Again, the group identified 30 problem areas in the first work session. These problem areas are presented in Table 1 in the order in which they were generated by the 58 attendees.

Table 1
Family Involvement Problem Areas as Identified by Session Participants

1. **Parental intimidation/outnumbered by professionals**
2. **Professionals think they know it all/know best**
3. **Lack of interest/concern on parent's/guardian's part**
4. **Parents avoid long-term planning**
5. **Parents cannot get off work/don't have transportation/Teachers don't adapt to parent's schedule**
6. **Little understanding of success for child on parent's part/Lack of success on the parent's part**
7. **Low expectation on part of parent**
8. **Lack of communication/use of professional jargon**
9. **Fearful of loss of financial/medical benefits and assistance**
10. **External problems for families (siblings)**

11. **Lack of education/knowledge/ability on parent's part**
12. **Lack of trust in educational system**
13. **Parents do not feel welcome in school**
14. **Parents not successful in school/negative educational experiences**
15. **Fear of the unknown-what will happen to children after leaving school**
16. **Labeling of the child (type of disability/special education)**
17. **Parents not asked to participate or be involved**
18. **Families do not want child to succeed/become independent**
19. **Lack of insight regarding life after school years**
20. **Parents do not feel opinions are valued**
21. **Failure of school to follow-up**
22. **Not all parties present as promised at IEP/ITP meetings**
23. **Parental participation only in negative context of school**
24. **Community pressure to maintain status quo**
25. **Parents tired/disillusioned/burned out**
26. **Parent perception that professionals know it all/know best**
27. **Lack of student/parent empowerment**
28. **Parent overprotectiveness**
29. **Lack of collaboration on part of all concerned parties**
30. **Lack of cultural understanding/considerations**

In addition, the problems listed in Table 1 were ranked according to the prioritized weighted scores assigned by the group. Problem areas in order of importance to the group are presented in Table 2. Of 30 problem areas identified in the first day's session, five of them emerged as the ones that represented the greatest group consensus.

Table 2
Top Five Problem Areas as Identified by Attendees

RANK ORDER●	PROBLEM	WEIGHTED SCORE
1	Lack of education/knowledge/ability on parent's part	105
2	Lack of interest/concern on parent's/guardian's part	95
3	Parents can not get off work and don't have transportation/Teachers don't adapt to parent's schedule	87
4	Fearful of loss of financial/medical benefits and assistance	68
5	parental intimidation/outnumbered by professionals	53

● 1 = most important problem

Group Discussion

Session #2 focused on identifying and discussing strategies to solve previously stated problems. Because of time limitations, only problem areas #1 and #2 formed the basis of the group discussion.

Lack of Education/Knowledge on Parent's Part

It was noted that while professionals perceived many parents as lacking in education or knowledge that could help their child, few professionals could say that they, or the program with which they were associated, offered parent training to remedy this perceived problem. Specifically, a show of hands of individuals or organizations in the room that offered such program(s) was requested. Only four out of the 32 participants indicated that their programs offered parental training. The group consensus was that many parents need some type of parenting skills training. Also, many voiced the importance of determining what parents need in terms of education, training, and assessment of the child's needs.

It was noted that while professionals perceived many parents as lacking in education or knowledge that could help their child, few professionals could say that they, or the program with which they were associated, offered parent training.

Specific suggestions were made that included (a) the use of parent informational groups, (b) monthly meetings about accessing benefits (Medicaid, SSI, and SSDI), (c) newsletters that addressed specific topics, and (d) making the most of telephone calls from parents requesting information. Specific programs that were mentioned included the "Parent-to-Parent Group" lead by Sharon Fox of the Alabama State Department. This group was described as a training group that consists of a collaborative effort by parents and professionals to train parents. An attendee, a parent of a child with a disability, underscored the importance of such programs. This parent indicated the preference to be trained by another parent, rather than a teacher or another professional. She also felt that another parent could more readily empathize, because they had *"walked in her shoes"*.

Discussion also referenced "Even Start", a program the State of Georgia introduced to help five-year olds come to school ready to learn. The program offers day care for children while parents attend educational classes. Parents also may be given stipends for training and attending conferences to offset lost wages and transportation costs. As well, reference was made to "Parents and Policymaking", an advocacy group which helps parents understand laws and how they affect their children.

It was recommended that the best training occurs (a) one-on-one, (b) consists of personal contact, (c) is couched in layman's terms, and (d) is carried out in the parent's natural environment. It may be necessary to move a meeting site to neutral ground such as a community center or local fast food restaurant, in order to facilitate rapport and trust between the parents and professionals. It was indicated that parents often know which professionals care and are willing to support them through word-of-mouth contact with other parents.

Parents and professionals indicated a need for sensitivity training regarding parents' circumstances. It was indicated that many parents may feel *"I live in this situation all the time - you don't. Respect me."* As professionals, we need to be able to show our interest and concern for parents. A recommendation was made to give this same list of problem areas in survey form to a group of parents so they could prioritize the problem areas. It was felt that the resulting list might be quite different in its ranked order.

Overall, the group felt that parent training is the key strategy to combat what professionals may perceive as lack of education or knowledge exhibited by many parents. Parent training can be done on many fronts and in many ways. It is truly multi-faceted and, as professionals, we are learning only now how to train and educate parents of children with disabilities.

Lack of Interest/Concern on Parents'/Guardians' Part

Many in attendance felt that this problem area could be addressed in terms of professionals' perception of parental lack of interest. However, this may not be the case. Parents may feel fearful or insecure and express themselves in ways that indicate a lack of concern to professionals. Many parents normally are not contacted by the school, for example, unless there is a problem associated with their child. Thus, school contact generates an element of distrust or suspicion.

"Sensitivity training" for professionals was recommended, since it was felt that some teachers need to raise their tolerance levels. Also, statements were made that indicated the system has failed to be adaptive to parents' and childrens' needs.

The perceived lack of interest on the parent's part may be due to a difference in elementary and high school systems. Parents perceived that they were needed when their children are in elementary school; however, by the secondary school years this may not be the case. Parents are often not aware of what their children are doing in their classes. As well, children do not want to be singled out due to their disability. Developmentally, they may be striving for autonomy and independence. Schools tend to perpetuate the separation of parent and child, as well as the separation of parent and school.

The perceived lack of interest on the parent's part may be due to a difference in elementary and high school systems. Parents perceived that they were needed when their children are in elementary school, however, by the secondary school years this may not be the case. Parents are often not aware of what their children are doing in their classes and children do not want to be singled out due to their disability. Developmentally, they may be striving for autonomy and independence. Schools tend to perpetuate the separation of parent and child, as well as the separation of parent and school.

Overall, the group concluded that a lack of interest and/or concern on the parents' part may be a problem of perception. Simply put, parents may not know how to respond. This may be especially true when professionals have expectations of how they think parents of children with disabilities should show concern and interest. There was general agreement that this issue is closely related to the issue of parental training.

Addendum Session

The addendum session began with problem area #3 and developed into an open forum for attendees. Problem area #3 indicates that parents and professionals often have conflicts over scheduled times for meetings. Professionals state that parents do not attend scheduled meetings because they cannot get off work or do not have transportation--reasons which may be viewed as excuses by some.

Parents feel that schools and teachers are inflexible and most parents' work schedules coincide with that of teachers (8:00 a.m. - 3:00 p.m.). One parent questioned whether professionals can leave their jobs anytime they feel the need to do so. She stated that 8:00 a.m. to 3:00 p.m. were the hours of professionals--not parents--and that they need to put themselves in the parent's shoes.

Frustration was exhibited by many parents in attendance. One parent stated that her child's school only saw parents on Tuesdays. She said that she was called without prior notification and *"told to come to the school to sign the IEP."* Others complained of IEP meetings lasting 15 minutes at the most, feeling pressured to rush through meetings and feeling pressured to sign the IEP, without the benefit of having additional time to reflect on its contents. Parents often appeared to feel caught in the middle; that is, if they did not conform to school and teacher pressures, they were uninterested, whereas, if they were involved and disagreed with the IEP, or made additional requests for their child, they were seen as troublemakers.

Many in the room agreed that an *"us against them"* mentality does exist on the part of professionals and parents. Professionals may feel threatened by parents, as well as parents feeling threatened by professionals. Parents may ask questions professionals cannot answer, or make requests they cannot fill.

Professionals in attendance agreed that parents were not totally responsible, because the school also is a partner in the transition process. Professionals recognized the need to work with parents from the beginning of the IEP process and the need for flexibility when scheduling meetings. Specific suggestions were made to contact parents by mail, telephone, and/or make home visits when necessary. Some areas in the State are working to change IEP meetings to a rotating system, rather than holding these meetings just once in the course of the school year. This system would be based on some type of anniversary date (i.e., birthday). This would allow for the time needed to maintain flexibility on the school and teacher's part.

Those in attendance stated that it was important to open up communication between the schools and parents. It was felt that parents need to be involved with the school system in a team effort in order to make education work. Many in the room agreed that an *"us against them"* mentality does exist on the part of professionals and parents. Professionals may feel threatened by parents, as well as parents feeling threatened by professionals. Parents may ask questions professionals cannot answer, or make requests they cannot fill.

Teachers may feel caught in the middle if they request too many resources for one child or classroom. They feel threatened because they are being viewed as trying to "buck the system." Teachers also feel frustrated and overwhelmed by their jobs. For example, if a teacher tries to be accommodating and flexible in scheduling IEP meetings outside school hours, teacher "release" time may not be granted. Teachers also state that there is a prevailing attitude by some superintendents and administrators that "special education will financially break the school system." Administrators and principals also determine the openness a school will have in regard to the community, by setting a closed or open-door policy.

Overall, the addendum session began with a discussion of the problem of parent and teacher flexibility when scheduling school meetings. The session quickly became an open forum where attitudes held by both parties were explored and discussed. Frustrations evidenced by parents and teachers indicate the need for continued open and honest communication between the two groups.

Conclusion

For many parents, feelings of confusion, distrust, and concern arise in relation to the change of services with the movement from school to adulthood (Thorin & Irvin, 1992). While parents have been referred to as *"critical team members"* (Smith, 1992), they often are given a limited role in the transition process (Browning, Dunn, & Brown, 1992).

Parents can be a rich source of information and often are in the best position to identify services needed for their children (Smith, 1992). However, parents are not recognized as being fully *"on board"* as members of the transition team (Wehman,1992).

While parents may not be fully "on board," professionals sense a lack of communication and support from parents. A recent study conducted by Browning and Brechin (1993) found that 90% of the rehabilitation counselors surveyed in the State of Alabama viewed parental involvement in the transition process as important. Conversely, 80% of these counselors reported that they were either "less than" or only "moderately" satisfied with parental support and involvement.

A similar study that surveyed Alabama special educators and coordinators found that teachers shared the same concerns regarding parental involvement as counselors. Of 296 teachers who responded, 141 or 47% of them reported that they were either "dissatisfied" or "very dissatisfied" with the support received from their students' parents (Browning, Brown, & Dunn, 1993).

While schools can facilitate the coordination and planning of transition activities, community and parental involvement are critical elements of a successful transition program (Wehman, 1992). According to Smith, Edelen-Smith, and Stodden (ND), planning for transition without the input of all stakeholders often will lead to failure or sabotage on the part of those not consulted.

Schools should not be the sole administrators of the transition process (Wehman, 1992). In essence, educational reform only can be accomplished with parental participation. If parents wish to abdicate these responsibilities and policy makers fail to address the issue, then many of the problems with transition will continue to remain unresolved (Halpern, 1992).

References

Aune, E., & Johnson, J. (1992). Transition takes teamwork! A collaborative model for college-bound students with LD. *Intervention in School and Clinic, 27*(4), 222-227.

Browning, P., & Brechin, C. (1993). Alabama's rehabilitation transition counselor's: A statewide study. *Alabama Council for Exceptional Children Journal*. *10*(1), 3-9.

Browning. P., Brown, C., & Dunn, C. (1993). Alabama's secondary education teachers and special education coordinators: A state-wide study. In P. Browning (Ed.), *Transition II in Alabama: A Profile of Commitment* (pp.83-90). Department of Rehabilitation and Special Education, Auburn University.

Browning. P., Dunn, C. & Brown, C. (1993). School to community transition for youths with disabilities. In R. Eaves & P. McLaughlin (Eds.), *Recent Advances in Special Education and Rehabilitation* (pp.193-209). Reading, MA: Andover Medical Publication.

Browning, P., Lehmann, J., & Rhodes, C. (1983). The usage of the Individualized Written Rehabilitation Program with mentally retarded clients. *Journal of Rehabilitation*, July/August/September, 65-68.

Epstein, J. (1987). Parental involvement: State education agencies should lead the way. *Community Education Journal*, 4-10.

Halpern, A. (1992). Transition: Old wine in new bottles. *Exceptional Children, 58*, 202-211.

Lindner, B. (1988). State programs for parental involvement. *Drawing in the family: Family involvement in the school* (pp.17-21). Denver, Colorado: Education Commission of the States.

Smith, P. (1992). Parents: The critical team members. *Office of Special Education and Rehabilitation Services News In Print, 5*, 34-36.

Smith, G., Edelen-Smith, P., & Stodden, R. (ND). *Seven pitfalls to avoid in systematic transition program planning and improvement: A school/community team response*. Manuscript submitted for publication.

Thorin, E., & Irvin, L. (1992). Family stress associated with transition to adulthood of young people with severe disabilities. *The Association for Persons with Severe Handicaps, 17*(1), 31-39.

Van de Ven, A., & Delbecq, A. (1972). The nominal group as a research instrument for exploratory health studies. *American Journal of Public Health*, 62, 337-342.

Wehman, P. (1991). Transition: What lies ahead in the 1990s. *Journal of Vocational Rehabilitation. 1*(1), 2-3.

Wehman, P. (1990). School-to-work: Elements of successful programs. *Teaching Exceptional Children, 23*(1),40-43.

Wehman, P. (1992). *Transition from school to adulthood for young people with disabilities*. In Rehabilitation Research and Training Center at Virginia Commonwealth University. (p. 2). A joint publication from the Vocational Options Project and the Rehabilitation Research and Training Center on Supported Employment.

PARENT INVOLVEMENT IN TRANSITION: A MULTICULTURAL PERSPECTIVE

Katherine Winchester and Phyllis Williams

The need for parent support and participation in educational programs has long been identified as critical in the success of program efforts. The parents of disabled students should be major partners in transition planning. Often the entire family, not just the individual student, is affected by the process and outcomes of transition. According to Brotherson, Berdine, and Sartini (1993), parent participation in the transition process is critical for two important reasons. First, children are impacted by their parent's values and expectations about issues such as integration and independence. Also, parents are possibly the single most effective advocates for their child, and their efforts aid in ensuring good working relationships between school and adult services.

The Individuals with Disabilities Education Act (IDEA), as amended in 1990 by P.L. 101-476, requires a transition plan as a component of the Individualized Education Plan (IEP). The IEP now must include an annual statement of the transition needs of students age 16 or ninth grade (or younger if appropriate), including a statement of interagency responsibility, before the student leaves the school setting. The IEP committee is responsible for identifying strategies to meet the transition needs of the student. Parents as equal partners on the IEP team are offered an integral role in the transition process (Brotherson, Berdine, & Sartini, 1993). Even though current legislation encourages family involvement, unfortunately parents often are relegated to participating in a planning process in which they may have a minimal effect (Szymanski, 1994). Brotherson, Berdine, and Sartini (1993) indicated that an explanation for the failure of many model transition programs may lie in their efforts to build into their efforts more direct involvement of parents.

Brotherson, Berdine, and Sartini (1993) indicated that an explanation for the failure of many model transition programs may lie in their efforts to build into their efforts more direct involvement of parents.

The role of multicultural parents in the transition process is particularly important, because their children continue to be disproportinately represented in programs for students with disabilities. According to Harry (1992), the literature on parent participation in special education documents that this group of parents demonstrates a pattern of low participation and that teachers often interpret this pattern to mean that such parents are uninterested in their children's educational programs. Lynch and Stein (1987) found that African-American and Mexican-American parents' levels of information and participation in special education programs were significantly lower than that of their white counterparts. Hispanic parents were found to be aware of assessment and Individualized Plan processes, but tended not to be actively involved in either. This study revealed that work schedules, "nothing", lack of bilingual communication, and general communication problems were identified as causes for their lack of involvement in their children's special education programs. If culturally diverse parents are to function effectively as decision-makers in the transition process, professionals must establish a working relationship with them.

Professionals' Perspectives

When working with culturally diverse individuals in transition, the role of special education includes being sensitive to the way in which specific cultural groups and individual families view disabilities, and working closely with family members during the transition process (Atkins, 1992).

When working with culturally diverse individuals in transition, the role of special education includes being sensitive to the way in which specific cultural groups and individual families view disabilities, and working closely with family members during the transition process.

Several studies have examined inappropriate professional interaction with parents from culturally diverse backgrounds. For example, Tomlinson, Acker, and Lindborg (1977) surveyed 355 students referred for psychological services in an urban school district and found that professionals initiated significantly fewer contacts with the parents of minority students, offered fewer services to minority students, and offered fewer services to minority as compared to majority parents. Harry (1992) found that the use of formal communication, with an emphasis on written materials, failed to inform and even alienated low income Puerto Rican parents. This study also illustrated that, on the other hand, when parents were placed at the center of the information sharing process, they became capable advocates for their children.

Ford (1992) reported that a recent study investigated the beliefs of student teachers concerning their levels of competence in providing services for students from socioculturally diverse backgrounds. The results indicated that many teachers are graduating without basic skills, culturally diverse attitudes, and knowledge in promoting equal educational opportunity and preparing students to participate effectively in society.

A study by Ford (1992) examined the need for multicultural inservice training for special educators working with African-American students and their families. The results revealed that special education administrators perceived a need for special education teachers to be involved in multicultural educational training programs. The author recommended that special educators participate in high-quality, ongoing, multicultural education inservice programming conducted by personnel who have been formally prepared. Ford further suggested that in order for special educators to provide services from a multicultural framework, they should have experiences such as the following:

- **Engaging Teachers in self-awareness activities to explore their attitudes toward cultural groups.**
- **Exposing teachers to accurate information about various cultural groups.**
- **Helping teachers to understand the diversity that exists between and within ethnic groups.**
- **Demonstrating effective interactions among teachers, students, family members, and other professionals.**

Brotherson, Berdine, and Sartini (1993) discussed five strategies that they found useful in supporting parents and young adults with disabilities in making a successful transition into adult life. These five strategies included: (a) encouraging early expectations for community life, (b) assisting parents in recognizing the importance of their contributions, (c) supporting parents in honoring the choices of their son or daughter, (d) increasing the role of social support networks, and (e) addressing parent concern regarding future employment.

Other professionals responsible for effectively implementing culturally diverse transition plans include vocational rehabilitation personnel. As Atkins (1992) stated, the primary purpose of vocational rehabilitation is to help individuals with disabilities to prepare for and successfully maintain employment and independent living. For successful transition of young adults with disabilities to occur, there must be a link between parents, students, special educators, vocational education, vocational rehabilitation, the community, and employers. Vocational rehabilitation personnel must facilitate strategies for including culturally diverse individuals. To do this, the vocational rehabilitation counselors should examine their own views regarding culturally diverse consumers and their families.

Successful transition of students with disabilities from school to adult life is a difficult and stressful experience for families, special educators, and vocational rehabilitation counselors. Working closely with parents through their child's transition is essential for the process to be successful. Strategies, such as providing training for teachers regarding multicultural issues and supporting individuals with disabilities and their families in the transition process, should be further developed and implemented in order to maximally involve parents from varying ethnic backgrounds.

Parents' Perspective

Professionals in special education are cognizant of the fact that parents of students with disabilities are assured the right to participate in the assessment and program planning process for their child through Public Law 94-142 (Lynch & Stein, 1987). The authors of this legislation intended for parents to become equal partners with professionals. Although parents' responses to this enfranchisement have been studied, only a few of these studies have investigated responses of parents from non-dominant cultures.

Culturally diverse students comprise an increasingly large number of the school-aged population, and based on the United States census predictions, *"by the turn of the century, minority groups will become the majority population in many states"* (Lynch & Stein, 1987, p. 105). However, among the special education student population that is currently eligible for transition services, multicultural races already predominate in some states. Thus, it behooves those involved in the transition of students to seriously examine the unique requirements of a culturally diverse population. Professionals must be prepared to interact with individuals of diverse cultures.

According to Atkins (1992), *". . . as personnel begin to formulate policies and programs specific to transition, the denial of human rights for these groups need to be taken into account"* (p. 446). It is imperative that those involved in implementing these transition services possess knowledge, understanding, and respect for their clients' unique culture. All participants must acknowledge that: "(a) racism is operative in our society; (b) minorities are not treated equally to their majority peers; and (c) we are all a part of both the problem and the solution" (Atkins, 1992, p. 444). However, as Obiakor (1992) stated, we must draw a line between being sensitive . . . and feeling overly sympathetic.

While there is a consensus that parental and family involvement is necessary for effective transition services, the problem is not resolved. Statistically significant differences in parent participation among the dominant and non-dominant cultures are documented . . .

Professionals should be sensitive to and not sorry for culturally diverse clients.

An effectively implemented multicultural transition plan will include the students and their parents along with other related service providers and the community resources. Parents and students play a vital role as partners in the transition movement (Atkins, 1992). Szymanski (1994) admonished that family, culture, and community are related to the ecological dimensions and appear to need immediate attention in the development of transition services.

Szymanski stated that *"Individual transition professionals can greatly increase their effectiveness by recognizing, respecting, and encouraging families as powerful partners in transition planning"* (1994, p. 405). Consequently, the ultimate goal of transition services, to empower students or clients, is identified. This empowerment is easier to achieve when family and community are involved in the transition process.

While there is a consensus that parental and family involvement is necessary for effective transition services, the problem is not resolved. Statistically significant differences in parent participation among the dominant and non-dominant cultures are documented, and reported by many special educators. The study by Sontag and Schacht (1994), for example, provided evidence that families from diverse ethnic and cultural experiences may have unique needs. They cautioned, however, that the ethnic differences may have been confounded by income status.

Whether it is due to low-income or cultural diversity, the consensus is that low-income, multicultural parents do not participate in the transition process as much as their dominant culture parents. Harry (1992) found that studies have revealed a picture of extreme alienation and markedly low awareness of rights and procedures among low-income or under-educated African-American parents. She concluded that there are four common interpretations of these patterns of passive parental participation, which are: (a) trust, (b parental apathy, (c) logistical constraints or stressful life circumstances, and (d) parents' disagreement with special education classifications.

Lynch and Stein (1987) reported the following findings as barriers to active parent participation: work, time conflicts, transportation problems, child care needs, and general communication concerns/problems. The parents also reported that they would attend meetings if: (a) the time were convenient for them, (b) transportation was provided, (c) they received more advance notice of meetings, and (d) child care was provided.

Scheduling of conferences appears often in literature as a major difficulty for low-income parents. However, one must wonder *"Is too much to ask that, where necessary, conferences by held after working hours, and that parents by polled well beforehand regarding the best times for the scheduling of conferences?"* (Harry, 1992, p.129). Harry also implied that child care and transportation problems could be easily resolved with some ingenuity and cooperation from the system. For example, the conferences could be held at a more convenient location, or even in the home of some families.

Although the findings reported by Lynch and Stein (1987) include viable solutions to some of the barriers to parent participation, Marion (1980) reported an even greater barrier which encapsulates those identified by Harry (1992). According to Marion:

> **The greatest reaction expressed by parents of culturally diverse handicapped children has been one of anger and dismay at the policy of overinclusion of their children in classes for the mentally retarded and emotionally disturbed. This policy, as practiced by the schools, has permeated the thinking of culturally diverse families to such an extent that they have become desperate and confused. The anger displayed by these parents has been a reaction against an educational system that they feel has promoted these two categories as the only appropriate depositories for their children.** (p. 617).

Perhaps this anger has perpetuated what Harry 1992) called mainstream America's widespread view of these families as pathological. This misconception offers school personnel another excuse not to interact with families from culturally diverse neighborhoods. Therefore, it becomes the responsibility of all involved in providing transition services to dispel such stereotypical myths and negative labeling.

According to Obiakor (1992), *"negative labels . . . are counterproductive to learning and pedagogy"* (p. 164). Atkins (1992) explained that *"The tragedy of negative labeling is often lost potential and lost hope"* (p. 445). She also pointed out that mistrust of members of the dominant culture, and self-doubts which often result from such labeling, can cause rejection of rehabilitation or other human services necessary for successful transitioning. Personnel must remember that like members of the dominant culture, culturally diverse parents and clients must be approached on an individual basis, not stereotyped (Atkins, 1992).

Discussion

In order to prepare for the growing challenge of implementing a viable culturally sensitive transition system, Atkins (1992) has defined three prevalent themes. These suggestions focus on the need for professionals to recognize that (a) experience with and meaningful exposure to minority persons is necessary; (b) there is no blueprint for working with cultural groups; and (c) each consumer must be viewed as an individual (Atkins, 1992, p. 443). While pursuing methods that will ensure successful transitioning of culturally diverse clients, professionals must reassess the roles of parents. It is generally accepted by those involved in transition services that parents play a vital role as partners in the transition movement. The professionals' goal is to make that role a positive and supportive one. This can be accomplished if everyone involved internalizes the fact that *"Success cannot be claimed until we embrace diversity as 'normal'"*(Atkins, 1992, p. 456).

Harry (1992) developed new parental roles that envision parents as: assessors, presenters of reports, policy makers, advocates, and peer supports. According to her, parents often are made to feel uncomfortable or intimidated after going to all the trouble of finding a baby sitter or losing a day's pay to attend a conference. Perhaps these feelings would be eliminated if professionals were to treat parental input as valued and necessary information.

Conclusion

As a result of the implementation of her suggested roles for parents, Harry (1992) concluded that *"Were schools to reconstruct parents' roles to offer parents meaningful input in the assessment, placement, and remediation of their children, parents would most likely develop a sense of competence and would want to share their learning with other parents"* (p. 129). We agree that parents should be involved as much as possible in every aspect of their child's transition process. For culturally diverse parents, extra effort may be required initially to achieve this goal. It is a major challenge for the professionals to dispel the mistrust and self-doubt that has been perpetuated for many years among the culturally diverse populations. However, with dedication and perseverance, it can be done!

We agree that parents should be involved as much as possible in every aspect of their child's transition process. For culturally diverse parents, extra effort may be required initially to achieve this goal. It is a major challenge for the professionals to dispel the mistrust and self-doubt that has been perpetuated for many years among the culturally diverse populations. However, with dedication and perseverance, it can be done!

While many professionals tend to believe that implementing these changes is far too demanding of their time and resources, we believe they will find the rewards worth the effort. If parents can develop a sense of competence, it is highly probable they will want to share their knowledge with others, and will in the process replace the need for some professional resources. Active, participating parents can train other parents to become active, participating parents. This, we believe, is the secret formula for empowerment.

As we seek to empower the culturally diverse population by gaining parent participation, however, we must remember that we represent the interests of the client. Therefore, we should strive to have parents and professionals working with the client to reach his self-determined goals. This accomplishment not only will alleviate much of the demands placed upon the professional's time, it also will ensure successful transitioning of clients from all cultures. Indeed, this is our ultimate goal; and with parents and professionals working together with the clients, it can be accomplished.

References

Atkins, B. (1992). Transition for individuals who are culturally diverse. In F. Rusch, L. Destefano, J. Chadsey-Rusch, L. Phelps, & E. Szymanski (Eds.), *Transition from school to adult life* (pp. 443-457). Pacific Grove, CA: Brooks/Cole.

Brotherson, M., Berdine, W., & Sartini, V. (1993). Transition to adult services: Support for ongoing parent participation. *Remedial and Special Education, 14*, 44-51.

Ford, B. (1992). Multicultural education training for special educators working with African-American youth. *Exceptional Children, 59*, 105-114.

Harry, B. (1992). Restructuring the participation of African-American parents in special education. *Exceptional Children, 59*, 123-131.

Lynch, E., & Stein, R. (1987). Parent participation by ethnicity: A comparison of Hispanic, Black and Anglo families. *Exceptional Children, 54*, 105-111.

Marion, R. (1980). Communicating with parents of culturally diverse exceptional children. *Exceptional Children, 46*, 616-623.

Sontag, J., & Schacht, R. (1994). An ethnic comparison of parent participation and information needs in early intervention. *Exceptional Children, 60*, 422-433.

Szymanski, E. (1994). Transition: Life-span and life-space considerations for empowerment. *Exceptional Children, 60*, 402-410.

Tomlinson, J., Acker, N., Canter, A., & Lindborg, S. (1977). Minority status, sex and school psychological services. *Psychology in the Schools, 14*, 456-460.

EMBRACING FAMILIES IN THE TRANSITION PLANNING PROCESS: PERCEPTIONS AND EXPECTATIONS

Vivian Larkin and Jackie Echols

A family-centered community-based approach to transition is a major theme of the nineties. The shift from a client-centered to a family-centered delivery of services approach has occurred over the last decade. The importance of the families role is highlighted by the fact that many of the difficulties young adults with disabilities experience include social adjustment, living conditions, inadequate financial resources, restricted opportunity for postsecondary education, and other personal and social problems (Halpern, 1992). This paper addresses several issues related to the family's role in the transitional planning process.

Families of individuals with disabilities realize their family support networks dwindle with the increasing age of persons with disabilities. This realization is compounded by the lack of previous legally binding support through the school systems, once the youth with disabilities becomes twenty-one years old. Many service providers are unaware of the level of support removed from the family upon high school graduation of the young adult.

The transition to adulthood is a stressful time for parents and young adults with special needs. Research identifies several issues related to the family's role in the transitional planning process (Turnbull & Turnbull, 1993; Halpern, 1990; Lusthaus, Lusthaus, & Gibbs, 1981; Brothersome, Turnbull, Turnbull, & Bronicki, 1988).

Inclusive in the issues exists loneliness that stems from isolation and a lack of social networks. Parents of children with special needs often feel excluded as well. When special services were beginning to form, individuals with disabilities were almost always limited and segregated from ordinary programs. In recent years, however, concentration to include children with disabilities in school and community activities is in evidence. Nevertheless, we have underestimated the need to address the inclusion of their parents (Yoshida, Fenton, Kaufman, & Maxwell, 1978; Wehman, 1992).

Reauthorization of the Individuals with Disabilities Education Act (Public Law 101-476) and the Rehabilitation Act of 1975 provides parents of children with disabilities rights and responsibilities to be involved in the planning process. Parental involvement in schools has long been recognized as being important for ensuring the quality of school programs and for enlisting support from the broader community. Unfortunately, the families of individuals with disabilities are often perceived as being dysfunctional by many professionals (Paul, Porter, & Falk, 1993). Of course, this misconception hinders professionals to effectively work with these families. Clearly, it is important to recognize that all parents have great difficulty in getting involved with the school activities of their children. For example, now there are greater financial, career, and personal challenges that families need to meet which, in turn, reduces the time and energy available to ensure that their child's educational and personal needs are addressed (Brand & Pressman, 1991).

According to Brand and Pressman (1991), transition often brings temporary discomfort. Lowenthal (1986) states transition from program to program can be very difficult. Clearly, parents and professionals need to remain open to change, because the process of transition and development challenges everyone's desire for stability.

In 1978, Yoshida and others (1978) completed a study of school personnel's attitudes about the role parents should have in the planning process. Results of the study indicate that school personnel felt that parents should provide pertinent information to be used in the planning process, but are not to be expected to participate actively in making decisions about their child's program. Unfortunately, in 1994, these same attitudes still prevail among school personnel and service providers (Vaughn, Bos, Harrell, & Lasky, 1988; Goldstein, Strickland, Turnbull, & Curry, 1980).

When given a questionnaire that measures parent perception of involvement in school decision-making, the greatest percentage of parents responded that they often found themselves in the role of being the "receiver" or "giver" of information regarding the child (Yoshida, et al, 1978). The role of no involvement was second, and the role of having decisional control was hardly mentioned. Parents and service providers may both behave in ways that undermine the young adult's ability to move on.

Families of individuals with disabilities realize their family support networks dwindle with the increasing age of persons with disabilities. This realization is compounded by the lack of previous legally binding support through the school systems, once the youth with disabilities becomes 21 years old. Many service providers are unaware of the level of support removed from the family upon high school graduation of the young adult. Throughout the transition process, parents should seek professional advice and support, and should be willing to follow through the advice given. Parents might be relieved to know that many of their difficulties are common among children in transition (Lowenthal, 1986; Brand & Pressman, 1991; Turnbull & Turnbull, 1990).

The probability of the adult's inability to leave home or to gain meaningful employment is another issue pertaining to the transition of individual's with disabilities. As little as two decades ago, it was widely believed that children with developmental disabilities could not live or participate in their communities (Burke, 1990). Today, however, many children with developmental disabilities are growing up with their families. In essence, parents want to do the best for their children in order to give them a better opportunity to grow and develop. Without a sense of expectations, parents may become discouraged in their day-to-day search for help (Brand & Pressman, 1991). Families and their children will benefit if service providers express confidence in the parents' ability to plan for their child's future.

Brothersome et al. (1988) acknowledge that no one can say with certainty what will be needed for the future, but generally speaking, those without disabilities can and often do make informed choices. By contrast, families of youth with disabilities may not have this same opportunity. The lack of this knowledge poses a problem for families and their future support systems. Although families of adults with disabilities experience difficulty when planning for the future, it is imperative that these efforts be embraced by all.

According to Turnbull and Turnbull (1990), families are discarding the cumbersome past that restricts and wrongly teaches that children with disabilities are burdens. Families and children should expect to be included and accepted.

To overcome these and other issues, families should ask professionals about their dreams and expectations for people with disabilities, even before any other conversation occurs. If there are differences in the expectations, there will be differences with respect to the techniques and interventions. Professionals need to encourage family members to become empowered through education and participation in all aspects of planning.

Parents' perceptions of their involvement in planning for their children must be positive. Most definitely, parental support is necessary in carrying out transition plans. After students leave high school, it is up to the parents to ensure that they obtain needed services. Thus, parental involvement in transition planning is essential. Finally, the vision of a family-center/community-based approach to transition services is vital. This method of service delivery will require an expansion of services, as we know them today. Additionally, the federal transition initiative must stimulate renewed attention to this pressing problem.

References

Brothersome, M., Turnbull, A., Bronicki, G., Houghton, J., Gordon, C., Summers, J., & Turnbull, H. (1988). Transition into childhood: Parental planning for sons and daughters with disabilities. *Education and Training in Mental Retardation*. 165.

Burke, E. (No date) How families, schools, and communities are including children with disabilities all across America. *Children Today, 20*(2), 2-6.

Office of Civil Rights, U.S. Department of Education. (1992). National and state summary of data from the 1990 elementary and secondary school civil rights survey. (Unpublished data available from the U.S. Office of Civil Rights).

Paul, J., Porter, P., & Falk, G. (1993). Families of children with disabling conditions. In J. Paul & Simeonsson (Eds.), *Children with special needs: Family, culture, and society* (pp. 3-4) (2nd Ed.). Orlando: Harcourt Brace Jovanovich Publishers.

Wehman, P., Kregel, J., & Barcus, M. (1985). From school to work: A vocational transitional model for handicapped students. *Exceptional Children, 3*(1), 25-37.

Yoshida, R., Fenton, K., Kaufman, M., & Maxwell, J. (1978). Parental involvement in the special education pupil planning process: The school's perspective. *Exceptional Children, 14*, 531-534.

LESSONS LEARNED ALONG THE BUMPY WAY

Michael C. McClanahan

Lynn Norris and I met 15 years ago and life has not since been the same for either one of us. Over the years, we have learned a few things that might be of interest to persons who (by choice or otherwise) are interacting with human service delivery systems. It is sincerely hoped that by putting into print "our lessons", others can avoid unnecessary pitfalls. Section one, "Our Family Tree," provides a background for the main section, which is ten lessons learning along a "bumpy way."

- **Individual Efforts Beat Organizational Ones**
- **The Larger the Organism, the More It Is Preoccupied with Self-Preservation**
- **Professionals' Opinions Tend to be Rooted in "Not's" Rather Than "Why Not"**
- **Failing at Something Desirable Beats Succeeding at Something That Stinks**
- **My Unwritten Rules Are Better than Your Unwritten Rules**
- **We Are All People of This World**
- **Be Careful with Freedom; You Might Get Networked**
- **A Small-Term Commitment Is Better than A Big Short-Term One**
- **Reinforcement Is Far More Effective Than Punishment**
- **The Only Consequence of Optimism Is Success**

Our Family Tree

There are three historical and background accounts provided here, including (a) the early dynamics that brought our relationship into being, (b) some factors about Lynn that may have some relevance, and (c) my family and how we all relate.

The Beginning

The story of our relationship began in 1979 in Savannah, Georgia. At that time, I was a vocational evaluator and program manager at Goodwill Industries, and Lynn Norris was a new client. Lynn's disability diagnoses, as required by the referral process and dutifully noted on the referral form, was "paranoid schizophrenic, mentally retarded, cerebral palsy, partial deafness". Upon careful review of all of the referral information, I scheduled an intake interview with this then 17-year-old young man.

EST COPY AVAILABLE

Lynn came in for the initial interview and rapport was easily established. He quickly revealed that he lived with "12 or 13 pregnant women", which I considered was, undoubtedly, a figment of his psychiatrically diagnosed aberrant imagination. Upon further investigation, however, I discovered that he did in fact live in a home for unwed mothers, and was the only male living in that residence (other than the houseparent). Lynn had been discharged from the school system and referred to vocational rehabilitation as it was determined that he would be unable to complete his high school degree, due to his mental illness and retardation. The thinking of those responsible for his care was that his needs would best be suited by placing him on some type of vocational track.

Lynn was subsequently enrolled as a client at Goodwill Industries, and two things became apparent to me. First, it was painfully obvious that he behaved differently from anyone I had ever met. Second, he did not seem to fit the classification of being mentally retarded.

Lynn's disability diagnoses, as required by the referral process and dutifully noted on the referral form, was "paranoid schizophrenic, mentally retarded, cerebral palsy, partial deafness."

Early on, I took an interest in being an advocate for him because it seemed no one else was particularly interested, and he was an intriguing young man. After all, anyone who had as many disability diagnoses (some clearly in error), and who lived in a home for unwed mothers warranted some attention! Our advocacy relationship was formalized through the Georgia Advocacy office, a small nonprofit organization headed by Tom Kohler who specializes in protecting the rights of persons with disabilities by networking them with volunteers.

This move proved to be particularly fruitful when the agency that maintained custodial rights to Lynn decided to ship him off to a halfway house in Kansas City, Missouri. The advocacy network went into full swing and blocked the move to dump him into another inappropriate placement one more time (a discussion of his early childhood background is detailed in the following section).

Once the move was thwarted, Lynn and I broke some of the *"rules of conduct"* for professionals in the field of rehabilitation, (one of which is maintaining "professional objectivity") and became good friends and spent some off-time together. Eventually, a mutual agreement was reached that I would become Lynn's foster parent, and that he would live with me. Although formal adoption procedures never followed (Lynn said that permanence frightened him and he did not want to have a last name like "McClanahan" because it was hard to spell), I have been his legal guardian since that time.

Lynn's Story

Lynn Norris was born in Savannah, Georgia, on August 16, 1962. He was born to an unwed mother and given up for adoption at birth. His name was assigned to him by his caseworker. He was told by his well-intentioned caseworker that he was born in New York (to protect the identity of the birthmother, I suppose), and that at least one of his parents was a musician. Although he was given up for adoption at birth, he was never adopted. The agency that sponsored the mother through her pregnancy maintained custodial rights to him up until he reached adult age. They were unsuccessful in ever locating a suitable placement for him, which resulted in his being subjected to at least 17 different foster care and institutionalized placements in his first 18 years (these 17 placements represent a minimum number, as these were all the placements that could be located by a review of the file).

Apparently some of the placements for Lynn were better than others. Only one of his former foster care families made contact with us after our story appeared in the *Savannah News Press*. Lynn, only upon prodding, is willing to recall that some of the other placements were abusive.

Eventually, a mutual agreement was reached that I would become Lynn's foster parent, and that he would live with me. Although formal adoption procedures never followed (Lynn said that permanence frightened him and he did not want to have a last name like "McClanahan" because it was hard to spell), I have been Lynn's legal guardian since that time.

Lynn has always aspired to work somewhere in the media, and wants to work in a situation that facilitates his musical interests. In addition, he wants his own family. Physically, he has the capacity to perform all of his activities of daily living. He is proficient at playing guitar and piano, is an excellent lyricist, and ambulates with a noticeable gait dysfunction, although he is able to play most sports to his own satisfaction.

It is ironic that Lynn's present independent living situation resulted from a rehabilitation facility's assessment that he was, if left alone, *"a danger to himself or others"*. The staff at the facility had determined that he was incapable of living independently, and therefore placed him in a halfway house. This "suitable" placement, we discovered, was actually a "home" for the elderly. As one might guess, Lynn had far too much energy for his housemates.

Lynn had problems with the managers of the house because he did not like to go to bed at 7:00 o'clock, did not like his food pre-chewed for him, and he did not particularly enjoy sitting quietly and doing nothing. Of the rules, however, he could adapt to them all except for the one that disallowed music. When he was told that he could not listen to music in the home, he found alternative locations for entertainment (clubs, restaurants, open air concerts, etc.).

One night when Lynn came home after making his rounds, he was locked out of the house and the police were called. The house parents told the police that he was acting crazy, and they would not let this strapping 120 pound, five foot four inch monster (with cerebral palsy, no less) back into the house where he could terrorize the other residents. Amazingly, he was committed to a psychiatric unit in a local hospital.

The staff of the psychiatric unit, to their credit, quickly deduced that Lynn was in full control of his faculties, and was not a danger to himself nor others. Accordingly, they released him to me and I quickly placed him in his own apartment. Lynn has now lived in his own apartment over 2 years, with absolutely no problems. He maintains an active lifestyle. He is involved with the university radio station on a regular basis, has taken continuing education courses through Auburn University, is a frequent speaker to rehabilitation classes on campus, and spends a great deal of time pursuing his interest in media, particularly music.

Mike's Story

When our relationship began, I was single, a new professional in the field of rehabilitation and lived in Savannah, Georgia. Subsequently, I married Julie, and together we have two sons, Matthew and Tommy, ages 7 and 11, respectively. The term that best fits the relationship enjoyed among the five of us (Mike, Julie, Tommy, Matthew, and Lynn) is *"family"*. We spend time together on all of the special holidays, and he makes a weekly visit to do his laundry and attend to other matters around the house. Both Matthew and Tommy enjoy Lynn's company, and Lynn enjoys theirs, and they get along very well and have some common interests.

Lessons Learned along the Bumpy Way

The purpose of this section is to highlight a few of the lessons that we have learned (sometimes by painful experience) that I hope will help others in their pilgrimage towards full participation in our society. These *"lessons"* are not ones that are intended to be universal truths, but certainly have been true for us in the past 15 years.

Presented below are 10 "lessons" that we have learned in the past 15 years. There are two types, mainly (a) tips for dealing with agencies and organizations, and (b) tips for individual or self-insight.

Individual Efforts Beat Organizational Ones

Presented below are 10 "lessons" that we have learned in the past 15 years. There are two types, mainly (a) tips for dealing with agencies and organizations, and (b) tips for individual or self-insight.

Over the past 15 years, we have been involved with at least 11 governmental agencies and private nonprofit organizations. In all of this time, the organizations have failed to provide any services that directly resulted in an enhancement of his quality of life. This is not to suggest that all of organizations were complete failures, but rather it seemed that their efforts were always destined to maintain status quo.

The actions that have benefitted Lynn, however, have been those of individuals who have taken a special interest in him. The actions of these individuals were self-initiated, as opposed to organizationally initiated, and at times were in conflict with the rules and regulations of the organization. Working in conflict with the rules and regulations of the organization, but in the interest of the stated mission of the organization is sometimes referred to "working outside the lines".

One such example of an individual *"working outside the lines"* to benefit his overall quality of life occurred several years ago when Lynn was a resident of a rehabilitation facility. He was generally uncomfortable with his residency and bored. One of the rehabilitation/production managers took a special interest in him, and occasionally took Lynn with him to shop for up-dated clothes (something other than K-Mart), and they shared a mutual interest in music. The mutual interest in music led to some networking with musicians and other persons of similar interest, and he found some degree of comfort, a network of friends, and persons with similar interests. Unfortunately for Lynn's new friend, however, no support was given from the facility for him to spend time with Lynn, and conflict developed with some of the facility's staff as a result.

The Larger the Organism, the More It Is Preoccupied with Self-Preservation

We have found the large agencies (e.g., state and federal agencies, large facilities, etc.) to be incapable of providing individualized services designed to fit his specific needs. The smaller agencies seem to do a better job of being flexible, bending the rules, and accordingly were of more benefit.

Liability issues surfaced as an excuse to prohibit Lynn from working or living independently. We were frequently told by individuals representing these organizations that if he were to be placed in an independent living situation and something happened to him, they could be sued for negligence. Our response was that with a modicum of supervision Lynn was capable of independent living, and that his continuing to be housed in unsatisfactory environments was akin to a slow terminal illness. Could the agency be held liable for a catastrophe that was long term and terminal?

In addition to the "liability" question, it also seemed that Lynn, over the years, has been kept in some programs when it was of benefit to the program to have a warm body in there, but otherwise there seemed to be no appropriate reason to keep him situated in that circumstance. For example, a rehabilitation facility keeps Lynn on a piece-rate job, when piece-rate work is neither within his interests nor his capacities. Remember, he is a person who happens have a mild degree of cerebral palsy, and although he does have dexterity, it is not his strong suit. His interest, beyond music, is in dealing with people.

Keeping Lynn in a program when it was not to his benefit is one example of the organization's tendency toward self-preservation. Another example is the other end of the spectrum, whereby the organization has discharged him when it was not to the benefit of the organization to keep him. On one such occasion, exactly 2 hours' notice was given that he was being sent home and was not to return, after having been involved in the rehabilitation program for 9 months! I went into the staffing with him (the rehabilitation facility people had asked that Lynn not be involved in his own staffing) and asked why he was being terminated. The response was that they had no other services they could offer him that would be of benefit to him, and that further service delivery would not result in a successful placement. Inquiry was then directed as to the nature of the services that had been provided. For example, had they worked on his independent living skills? Had they considered placing him on any job other than those that require manual dexterity? Had anyone in the rehabilitation facility taken him out into the normalized world and worked with him on normalized behavior? Had anyone in the rehabilitation facility ever experienced Lynn in any setting, other than that which was provided by the rehabilitation facility? Could they clearly identify the specific factors that kept him either from being able to live independently or being gainfully employed? The response to all of these questions was not only a "No", but a hostile "No".

Professionals' Opinions Tend to be Rooted in "Not's" Rather Than "Why Not"

The previously described two lessons that we have learned along the "bumpy way" provide only a partial explanation as to why professionals prefer to err on the side of conservatism than on the side of individual choice. Many of us are familiar with the Robert Kennedy comment on human nature when he observed, *"Some men look at the world and ask 'Why?' Others look at the world and ask 'Why Not'"*. It seemed that many of the professionals working with Lynn would review his background information, realize that he had never lived in a normalized society, and they quickly deduced that he was incapable of living in a normalized way. Unfortunately, it seems that these very same individuals were unable to look at what his capacities might be if he were given the opportunity to demonstrate them.

One of the issues confronting all of the human service delivery systems, and particularly those services that are delivered in centers, involves the concept of generalizeability. In other words, do the behaviors demonstrated in the center accurately predict what the behavior will be in the "real world"?. For example, the most common reason that we were told that he was incapable of living in an independent situation was that he had not displayed the proper behaviors in the dorm/institution that "normal" people would display. How do we know this? Do "normal" people get institutionalized for us to observe their behavior?

In 1973, Dr. Rosenhan published a study wherein he reported the results of an experiment that involved the infiltration of non-emotionally disturbed persons (called "pseudopatients) into 12 psychiatric hospitals around the country. What he found was disturbing and served to change the practices of all psychiatric hospitals in this country. Dr. Rosenhan, among other things, found that "normal" people in the institutions behaving normally (the pseudopatients were instructed to behave normally once they were admitted) were perceived as deviants and medicated. In other words, the hospital staff labeled their behaviors as "abnormal" even though they were behaving normally. Why would the pseudopatients be labeled as deviant? Perhaps because they were in a deviant environment, and they were expected to perform that way, and besides, no one knows how a "normal" person would act in that situation!

Failing at Something Desirable Beats Succeeding at Something That Stinks

Wouldn't you rather shoot for the stars and miss than shoot for a pile of manure and hit it? Very few people want to "settle" but will if they are unable to achieve their grandest goals. In Lynn's case, there has always been a mind-set that we should start in the manure and hopefully grow out of it (not unlike mushrooms), rather than looking at the glitter of the stars and trying to figure out the best way to get there.

One of my ongoing dilemmas is that as a member of this society, Lynn has the desire and right to go and do the same things that other people do. Safety sometimes becomes an issue because he is a naturally trusting individual - another of his unique qualities. The mutual decision we made was that life itself is a risk. If you choose not to live it, however, the risk is removed but so is life. Therefore, with reasonable cautions, Lynn goes and does basically what he pleases in the very same fashion as do all Americans.

My Unwritten Rules Are Better than Your Unwritten Rules

Unwritten rules are ones that have their purpose, but ones which are frequently misused. For example, when unwritten rules are used to suppress the rights to freedom, then those unwritten rules are unjustified. When they are in place, however, to keep someone from getting hurt, then they are easily understood. For example, in one of the rehabilitation facilities in which he was a client, a religious ceremony was held on a weekly basis for 15 minutes during the 30-minute lunch break. Lynn had indicated that he was not interested in a religious service of this type, and asked to be excused. He was told that he could not be excused as this was part of the "program". I questioned the administration and was told that it was "an unwritten rule" that all clients would participate in this meaningful experience. Our "unwritten rule", however, was in conflict with their "unwritten rule", and fortunately our rule prevailed. Perhaps the administration was familiar with a written rule known as The Constitution of the United States of America.

We Are All People of This World

As simple and fundamental as this statement sounds, believing it has had a profound impact on the way in which we have interacted. There have been times when actions have been taken in order to protect "society" from Lynn's behaviors that are viewed as outside the norm. When, however, it became a truth that he should have the same opportunity to interact with the world as does every one else, it was liberating. It empowered Lynn to make decisions on his own behalf, provided that he fully recognized the potential consequences of his actions. This realization was key in the following lesson that we learned regarding freedom.

Be Careful with Freedom; You Might Get Networked

One of the very nice consequences of realizing that *"we are all people of this world"* is that Lynn has had a great deal more freedom than had we not realized and accepted this very powerful concept. What I discovered over the years is that my friends are not necessarily Lynn's friends, nor are Lynn's friends necessarily my friends. When left to his own devices, he is a much more effective person in networking than when in tandem with myself. A case to illustrate the networking principle is that a student at the university took a special interest in him while she was a DJ at the university radio station. Their relationship began five years ago and subsequently Lynn has become a "regular" at the radio station. He now works with other DJs (she has moved away) on song selection, queuing up records, and enlightens them on his understanding of the world of music. Lynn is well received there, and he values his relationship with the radio station because radio represents the intersection of his two greatest interests: music and media.

Another illustration of the networking as a consequence of freedom is that he now has a number of friends around town, local area merchants particularly, who he visits on a regular basis. This is similarly the case for salespeople at the mall. In addition, even though I have tried to network Lynn with fellow faculty members at the university and subsequently with students, when I abandoned this notion he became heavily involved with both of these groups of people. I suppose my ineffectiveness results from my providing too much filter between him and them. At any rate, he is much more effective at developing his own friends than I could ever have been for him.

A Small-Term Commitment Is Better than A Big Short-Term One

When I was in the process of deciding whether or not to adopt him as a family member, I sought the advice of the Director of the Georgia Advocacy office in Savannah, Tom Kohler. Tom has always been a great mentor to me in advocacy situations, and seems to understand people and their needs better than perhaps anyone I know. He did not let me down this time and gave me sage advice. Tom suggested that persons with disabilities have suffered frequently from being exposed to energetic individuals who want to do something for them, only to abandon them a short time later. Lynn's history was full of this kind of occurrence. He had averaged a different placement every year. Imagine how disconcerting it would be to completely change your home and your "family" every year of your life!

Reinforcement Is Far More Effective Than Punishment

We all know how potent reinforcement is for prompting appropriate behavior, but we all seem to be locked into the concept that punishment is a way to extinguish inappropriate behavior. Nothing could be further from the truth. The recidivism rate for our penal systems serve as one good illustration of the failure of punishment to effectively extinguish future maladaptive behaviors; and there are many other situations as well. For most of us, punishment is only an effective deterrent in the presence of the punishing agent. Take, for example, highway speeding. Almost everyone (studies indicate 95% or better) routinely exceeds the speed limit on interstates, but those same people slow down when a policeman is detected as being nearby. Most of us who get speeding tickets slow down for a short while and then eventually ease back up to the speed that we think is the fastest speed we can go without being stopped; a speed that is routinely in excess of the speed limit.

Reinforcement at almost every level has been shown to be a better shaper of behavior than punishment, including service delivery systems. Whenever Lynn and I have had volatile confrontations with providers, the typical result has been that the representatives of the agency have not acquiesced, but rather gone to great lengths to fortify their rationale for limiting Lynn's freedom. In the case of Lynn, I have found that punishment did not shape his behavior at all, but rather led to my having a feeling of profound guilt. His behavior has become much more within socially acceptable limits as a consequence of reinforcing those appropriate behaviors rather than punishing those that are inappropriate.

The Only Consequence of Optimism Is Success

A key ingredient to any successful effort in working with any type of person is that you believe the service that you provide is going to have favorable results. Working with Lynn has been no exception. We were highly optimistic that he would be successful in his independent living venture despite the "professional" opinion otherwise. Martin E.P. Seligman, in his book Learned Optimism (1991), repeatedly provides evidence that persons who are optimistic are more likely to be successful than those who are not very optimistic. In addition, he convincingly maintains, persons with greater optimism but with less skill are more likely to be successful than pessimistic persons with greater skill. This is a powerful concept to those in rehabilitation when we consider that our emphasis in service delivery has been to improve the skills of persons with disabilities, but we seem to overlook the consequence of the individual's expectation for success.

It is always a lot easier if the people involved have the determination to make things happen and the optimism that things will work out positively. Lynn Norris is one of the most optimistic people I know. His wonderful optimism has resulted in his being a successful person in this world, and has contributed largely to my joy in working with him. Despite all of the oppressive reports that have been written about him, actions taken against him, and bad hands that have been dealt to him in this world, he steadily maintains that he is a very happy individual and that life gets better every day. And it does.

References

Rosenhan, D. (1973). On being sane in insane places. *Science*, *179*, 250-258.

Seligman, M. (1990). *Learned optimism*. New York: Simon and Schuster.

FAMILIES IN TRANSITION: A LITERATURE PROFILE [1]

Alper, S. (1990). Parents' perceptions of transition programs for youth with severe handicaps. *Canadian Journal of Rehabilitation, 3*(4), 205-212.

Surveyed 103 parents of 111 high school students (aged 16-21 years) labeled severely handicapped throughout the state of Missouri. Parents' perceived needs were assessed for themselves and their children relative to (a) transition, (b) parental participation in the school program, (c) communication with the school, and (d) satisfaction with the school program. Parents reported a high degree of satisfaction with the school program even though their children are largely segregated from nonhandicapped peers and few graduates go on to any type of employment.

Bergaland, M., & Thomas, K. (1991). Psychosocial issues following severe head injury in adolescence: Individual and family perceptions. *Rehabilitation Counseling Bulletin, 35*(1), 5-22.

Examined psychosocial functioning and transition to adult status in 12 persons (over 18 years old) following severe closed head injury sustained during adolescence. A case study approach described changes in functioning following discharge and return to family and school. The outcome, as indicated by global social indicators, revealed dependence in many areas of adult functioning and underscored the need for interventions to promote adjustment and optimal transition to an independent living arrangement. Implications for rehabilitation professionals emphasize the need for psychosocial intervention to promote adjustment and optimal transition to an independent living arrangement.

Black. M., Molaison, V., & Smull, M. (1990). Families caring for a young adult with mental retardation: Service needs and urgency of community living requests. *American Journal on Mental Retardation, 95*(1), 32-39.

Examined the service needs of families caring for 571 individuals with mental retardation during the transition into adulthood, with an emphasis on the urgency of requests for community state-supported living services. Analysis of data from a community needs survey completed by the subjects' families suggested that requests of community living were related more to family stressors than to characteristics of the young adult or participation in regular daytime activities. The services most requested were those representing normalizing activities, and the major reason for seeking them involved promoting the young adults' independence.

---

[1] **This literature review was compiled specifically for Transition IV and done so under the supervision of Dr. Clarence Brown, Associate Professor, Department of Rehabilitation and Special Education (RSE), Auburn University. He instructed an advanced course on transition with 12 of RSE's doctoral students in the Winter quarter and this literature review was designated as part of the course assignment.**

Brotherson, M., Turnbull, A., & Bronicki, G. (1988). Transition to adulthood: Parental planning for sons and daughters with disabilities. *Education and Training in Mental Retardation, 23*(3), 165-174.

Conducted telephone interviews with 48 parents of young adults (aged 18+ years) with mental and physical disabilities to examine aspects of parent planning for adult needs and the relationship of that planning to family functioning. The greatest needs identified by parents concerned residential, socialization, and employment issues. Recommendations for professionals who work with families at this transition are offered.

Carlisle, L., & Lesniak, P. (1988). *The individualized education program (IEP) process: Rights and responsibilities*. California State Dept. of Education, Sacramento, CA. (ERIC Document Reproduction Service No. Ed 315 938)

This document presents one module in a set of training resources for trainers to use with parents and/or professionals serving children with disabilities; focus is on rights and responsibilities in the IEP process. The objectives of the module include (a) examining the role and responsibilities of parents in the IEP process, and discussing techniques for effective parental involvement, and (b) student involvement in the IEP process.

Cook, D., & Ferritor, D. (1985). The family: A potential resource in the provision of rehabilitation services. *Journal of Applied Rehabilitation Counseling, 16*, 52-53.

This article points out that families can be valuable partners in the vocational rehabilitation of a person with a disability. Also, it documents that family services have not, however, been provided by rehabilitation counselors, even though such services are encouraged by law. Reasons for the lack of family services, including the complexity of the topic and contradictory research findings, are reviewed. Implications for research and resources for practitioners are given.

Dallos, R., & Williams, C. (1988). Local support units for mentally handicapped people and their families: An evaluative study. *British Journal of Mental Subnormality, 34*(1), 23-34.

Examined the extent to which two noninstitutionalized units for mentally handicapped people were meeting the needs of clients and families. Surveys, observation and discussion with staff, and family interviews indicate that the units were providing valuable service (a constructive form of respite) for clients and their families. The homey atmosphere made it easier for parents to let go of their young adult son or daughter without feeling excessively guilty or anxious. The units should also consider easing the transition of the handicapped person from the family to living independently in the community.

Elkinson, L., & Elkinson, N. (1990). Using collaborative consultation with parents to promote effective vocational programming. *Career Development for Exceptional Individuals, 13*, 135-142.

This article discusses the use of collaborative consultation to maximize the development of vocational programming for adolescents with disabilities.

Everson, J. (1990). A local team approach. *Teaching Exceptional Children, 23*, 44-46.

This article indicates that transition planning is not the sole responsibility of one agency or discipline. It presents resources and strategies related to transition planning as examples of the creativity, resources, and commitment that can be generated when local professionals and parents engage in a cooperative and rational problem-solving approach.

Ferguson, P., Ferguson, D., & Jones, D. (1988). Generations of hope: Parental perspectives on the transitions of their children with severe retardation from school to adult life. *Journal of the Association for Persons with Severe Handicaps, 13*(3), 177-187.

Explored how parents interpret the events and relationships surrounding the transition of their children with severe disabilities from school to adult life. Analysis of qualitative techniques indicate that the parents interviewed perceived three distinct types of transition: (a) bureaucratic, (b) family life, and (c) adult status. Generational patterns of parental response to these transitions are discussed in terms of professional relationships and self-reliance. Several ways in which parent-professional cooperation around transition events might be improved are discussed.

Fewell, R., & Vadasy, P. (Eds.). (1986). *Families of handicapped children: Needs and supports across the life-span*. Austin, TX: Pro-Ed.

This text focuses on the developmental nature of families' experiences in caring for a handicapped child. Excerpts from interviews and statements by family members offer insight into family experiences that professionals often lack. Fourteen contributors explore these family expressions from two perspectives, intrafamilial supports and extrafamilial supports, which together reflect the life-span development of the family.

Gallagher, J., & Vietze, P. (1986). *Families of handicapped persons: Research, programs & policy issues*. Baltimore, MD: Paul H. Brooks Publishing Co.

This volume compiles the papers from a conference sponsored by the Mental Retardation/ Developmental Disabilities Branch of the National Institute of Child Health & Human Development (NICHD). The chapters cover a variety of topics, including (a) the history of families of children with disabilities, (b) exploration of family typologies and life cycles, and (c) the roles played by family members. Implications for public policy are discussed along with future research directions.

Garber, H., & McInerney, M. (1991). *Parental involvement in the vocational education of special needs youth: An evaluation and planning guide*. Bulletin No. 91542. Wisconsin State Dept. of Public Instruction, Madison, (ERIC Document Reproduction Service No. Ed 345 454).

This technical assistance manual describes school-based outreach strategies that involve parents in preparing youth with special needs for postschool jobs and independence. The key to the model is making existing school programs more effective through meaningful parent involvement and increased family support.

Haring, K., Lovett, D., & Saren, D. (1991). Parent perceptions of their adult offspring with disabilities. *Teaching Exceptional Children*, *23*(2), 6-10.

This article presents survey findings conducted on parent perceptions of their child's postsecondary experiences.

Houser, L., Moses, E., & Kay, J. (1987). A family orientation to transition. *Education of the Visually Handicapped*, *19*,(3), 109-119.

Describes a model that allowed 16 visually handicapped students and their parents to develop plans for the students' transition from school to employment by following a specially designed problem-solving process. Workshops were provided by a residential vocational rehabilitation center for the blind.

Lee, M., & Tenpas, S. (1987). *Parent-professional teamwork: Employment project for persons with disabilities*. Glen Ellyn, IL: Special Education Parents Alliance.

This booklet describes the history and philosophy of the Special Education Parents Alliance's Employment Project for Disabled Adults. Techniques for job search, job placement, and job coaching are explained.

Lerman, R., & Ooms, T. (1988, August). *Family influences on transitions to the adult job market*. William T. Grant Foundation, Washington DC. (ERIC Document Reproduction Service No. Ed 300 582).

A study examined the interplay among the initial family context of noncollege-bound youth, their entry into the full-time adult labor force, and formation of their families. It is concluded that public policies aimed at improving the transition of noncollege-bound youth to the adult job market must take into account the likely influence of the family context of youth--both families of origin and the families they create.

Lowenthal, B. (1986). Changing expectations: A challenge for parents and professionals. *Exceptional Parents*, *16*(7), 48-50.

The article describes common parental reactions to involvement in an early intervention program. Issues discussed include the tendency to focus on the child's disability, involvement in decision making, communication with program staff, facing anger, and feelings associated with the child's transition to a new program.

Lowitzer, A. (1989). *Family demographics, family functioning, and parent involvement*. Utah State University, Logan. (ERIC Document Reproduction Service No. Ed 311 669).

This nation-wide study assessed the effectiveness of the various delivery systems providing early intervention services to handicapped children. Data were interpreted to suggest that expected levels of parental involvement should take into consideration the family's economic, social, and educational resources, and that service providers will need to somehow address these areas when significant needs are evident.

Lundstrom, F. (1990). *Parents of young persons with special needs in transition from school to adulthood: Report for participating school districts*. Champaign: University of Illinois at Urbana-Champaign, College of Education, Secondary Transition Intervention Effectiveness Institute.

This article focuses on parents of persons with mental retardation, learning disability, and emotional disturbance/behavior disorder. The research sought to discover (a) the extent to which parents are involved in planning for their child's transition from school to adult life, (b) how the parents evaluate their child's education and social/emotional well-being, and (c) which education, rehabilitation, and transition services families perceive are required to meet their specific needs.

Lusthaus, C., Lusthaus, E., & Gibbs, H. (1981). Parents' role in the decision process. *Exceptional Children, 48*(3), 256-257.

Parental involvement in the individualized education program (IEP) conference, or planning meeting, has been mandated by law. This article presents the results of a study which attempted to gain understanding of (a) parents' positions on the roles they now play, and (b) the roles parents would like to play in the decision-making process of planing for their children's education.

Lynch, P. (1991). *Parent's perceptions of their involvement in planning the transition from school to work for their children with disabilities*. Paper presented at the Annual Meeting of the Southwestern Educational Research Association (San Antonio, TX January 24, 1991).

A study was conducted to determine how parents perceive their involvement in the planning the transition from school to work for their children with disabilities. Only 50 of the 240 correspondences were returned from which the data were derived. The study found that 46 percent of the parents had never been contacted by the school about their child's transition; most who had been contacted were involved. Due to the low response rates for the survey, the study found that many parents were ill-informed regarding transition and transition planning. It is possible that the low response rate is indicative of the status of parental involvement.

MacGugan, K. (1989). *Transitioning manual for parents, regular and special educators, vocational counselors, students and two adults with disabilities*. New Mexico State Dept. of Education, Sante Fe. (ERIC Document Reproduction Service No. Ed 318 143)

This manual offers guidance in coping with the major transitions commonly encountered by persons with disabilities. Chapters I and II are addressed to parents, cover the first five stages of life/education transitions, and include check lists and examples of problems that need advocacy (e.g., lack of school integration). Check lists for students, parents, school personnel, and vocational rehabilitation personnel are provided as are sample problems requiring advocacy.

McKinney, L. & West, C. (1985). *Extending horizons: Family and friends*. National Center for Research in Vocational Education. Ohio State University, Research and Development Series No. 257D.

This publication describes the role of (a) parents, (b) family members, and (c) close friends in the individualized education program (IEP) process. Included is an inservice guide that is comprised of a series developed for assisting disabled persons in their transition from school to work. Its purpose is to help family and friends understand the importance of their contribution and support as well as assist them to understand the balance that must be maintained between support and independence. Information is provided on societal attitudes toward family and friend participation in educational development of handicapped students and legislative support for parental involvement. The IEP is described in terms of (a) rule requirements, (b) family questions regarding the IEP documents, and (c) the due process hearing and the roles for parents at an IEP conference. Information on accessing vocational education and aiding the student in getting employment is presented in descriptive format.

McNair, J., & Rusch, F. (1987). Parent survey: Identification and validation of transition issues. *Interchange*, *7*(4), 1-2.

This article describes a study to investigate what issues are most important to parents by asking parents to rate transition-related research questions in order of importance, and to investigate parental involvement in the transition process. Results are reported and recommendations are made for future involvement of parents in transition planning.

McNair, J., & Rusch, F. (1991). Parent involvement in transition programs. *Mental Retardation*, *29*(2), 93-101.

Authors surveyed 85 mothers of handicapped children (aged 14-25 years) to examine parent involvement in programs facilitating the transition of persons with handicaps from school to adult life (work, independent living). A significant number of parents were unaware of any transition program for their offspring, although virtually all parents desired involvement of some kind. Parents also indicated preferences relating to their child not living at home upon graduation for school, working in the community, and earning a wage greater than or equal to the minimum.

Mendoza, J., & others (1988). *Parental Involvement*. California State Department of Education, Sacramento Division of Special Education.

This document presents one module in a set of resources for trainers to use with parents and/or professionals serving children with disabilities. The focus is on parental involvement. The modules stress content and activities that build skills and offer resources to promote parent-professional collaboration. Each module takes about 2 hours to deliver. The module guide has eight sections: A publicity flyer, topic narrative, overview, trainer agenda, activities, summary, bibliography, and evaluation. The objectives of this module are to: (a) describe the history of parental involvement as it relates to children with disabilities, (b) identify and understand the many roles of parental involvement, (c) develop a knowledge of the various stages of individualized programs or plans and identify ways parents can be involved in each stage, (d) analyze the role and responsibility of a case manager, (e) evaluate skills that are necessary for the many roles of parental involvement, and (f) develop a goal that leads to skill building in order to be more effectively involved. A bibliography identifies 17 books, magazines, or other resources.

Mulick, J., & Pueschel, S. (1983). *Parent-professional partnerships in developmental disability services*. Cambridge, MA:Academic Guild Publishers.

The authors of this book discuss the working relationship between professionals and parents in developmental disabilities to examine some of the circumstances that promote collaboration and trust and to look seriously at the future services and collaborative child intervention.

Ness, J. (1989). The high jump: Transition issues of learning disabled students and their parents. *Academic Therapy*, *25*(1), 33-40.

Considers issues facing learning disabled students and their parents during the transition from secondary to postsecondary learning settings and presents recommendations for resolving problems encountered during this period. Concerns and reactions experienced by parents and student reactions are discussed.

Parents as transitional specialists ("On Our Own" series) [Videocassette]. New York: Author.

This video focuses on the important role parents play in the transition process for their handicapped child. A panel of professionals discuss (a) when parents should start preparing for transition, (b) what service options they should investigate, (c) how they should evaluate these programs, and (d) generally how parents can be knowledgeable consumers of the options available to them.

Parent-employer partnerships: Developing employment opportunities for youth with disabilities (1987). (Report of a national conference, Alexandria, VA). President's Committee on Employment of the Handicapped; U.S. Department of Education, National Institute on Disability and Rehabilitation; & National Council on the Handicapped. Washington, DC: National Information Center for Children and Youth with Handicaps (NICHCY).

The concepts and information presented in this conference represent national trends in transition involvement by employers and parents. The first section summarizes the expectations and perceptions of parents, employers, young people with disabilities, and service providers, giving an overview of basic concerns and identifying successful approaches and techniques for developing employment opportunities. The second section outlines strategies, actions, and guidelines recommended by conference participants and others for adaptation by parents and employers to develop employment opportunities, find jobs and keep them. The third section presents techniques and tools parents employers can use to replicate the conference in their local communities. The fourth section contains listings of available resources and bibliography.

Parents in transition. A resource guide to move you from involvement to advocacy. National Parent Center, Washington, DC. National Coalition of Title I/Chapter 1 Parents (1985).

A resource guide for parents who want to become involved in and advocate for their children's education. The first section gives background on Title I/Chapter I and the opportunity this program gave parents to get involved in education. The importance of parental involvement is emphasized and suggestions on how parents can participate are given. This is followed by a section on the basic legal rights of students and parents: rights of free expression, access to public information, and access to student records. Next, a list of organizations that work on behalf of disadvantaged students and/or promote the rights of parents is given, divided into primary and secondary resources. Finally, and extensive annotated list of publications of help to parents is provided.

Payne, S. (1988). *Parent education to improve parental involvement in IEP's for severely head-injured children in grades 1-12*. Ed.D. Practicum I Report, Nova University. (ERIC Document Reproduction Service No. Ed 303 973).

The practicum was designed to assist parents of head-injured children in dealing with the special education system. The program provided parents with information about the special education system and encouraged them to take an active role at the IEP conference. The program increased the parents' knowledge and understanding about the educational needs of their head-injured child.

Phelps, L., Allen, C., & Kelly, A. (1987). A parent's guide to vocational education. *News Digest*, *8*, 1-10. Washington, DC: National Information Center for Handicapped Children and Youth.

This guide was written to assist parents in planning and monitoring their child's vocational education, and describes the elements of a high quality vocational education program. Outlined are important roles and questions parents should address in working collaboratively with professionals to provide meaningful, appropriate vocational educational plans. The primary focus in this paper is on general considerations and specific strategies for providing vocational education to students with mild disabilities. References are included.

Retish, P. (1988). Parent expectations and special needs students. *Special Services in the Schools*, *4*(3-4), 159-162.

Asserts that the support of home and parents is a major factor in the transition of special needs students from school to work. Survey research reveals that parent expectations of special needs students are minimal. Suggestions for enhancing support for parents and their special needs students are offered.

Securing technology funding: Empowering parents. (1990). *Exceptional Parent*, *20*(8), 6-8.

This is a thorough investigation of resource funding for assistive technology devices for persons with disabilities. It addresses how to locate community funding sources, set priorities, increase people's awareness of technological applications, and encourage parental involvement. The report also includes an annotated bibliography that lists additional funding sources.

Thorin, E., & Irvin, L. (1992). Family stress associated with transition to adulthood of young people with severe disabilities. *Journal of the Association for Persons with Severe Handicaps*, *17*(1), 31-39.

Forty-two (42) family members of young adults with severe developmental disabilities completed questionnaires describing transition-related stressful concerns. Most frequently mentioned concerns were (a) the young adult's getting along with others, (b) self-care capabilities, (c) responsible behavior, and (d) sexuality. Most stressful concerns were the quality and availability of services, interacting with service providers, and family financial problems and disagreements. Most frequently occurring problems were self-care and social capabilities, quality of residential services and interactions with residential providers, and school and work training and interactions with school staff. Financial and family problems were most predictive of individual and family stress.

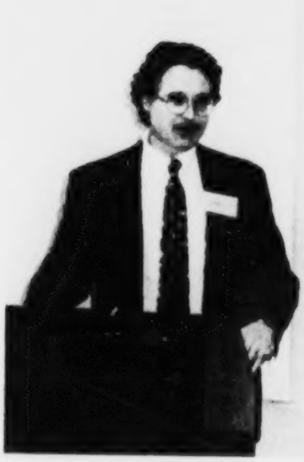
Turnbull, R., Bateman, D., & Turnbull, A. (1993). Family empowerment. In P. Wehman (Ed.), *The ADA mandate for social change* (pp. 157-173). Baltimore, MD: Paul H. Brookes.

This chapter examines the relationship between the Americans with Disabilities Act (ADA) and the families of persons with disabilities. Concepts embodied in the IDEA are also discussed in relation to the ADA.

Wilgosh, L., French, C., & Barry, M. (1985, April). *A parent, school, community partnership in career education for the mentally retarded*. (ERIC Document Reproduction Service No. Ed 257 293)

Paper presented at the 63rd Annual Convention of the Council for Exceptional Children, Anaheim, CA. The presentation focused on findings of three (3) studies, and implications for parent-teacher-employer involvement in development and implementation of career education programs for TMR adolescents.

BEST COPY AVAILABLE



RURAL-BASED PROGRAMS
for
TRANSITION FROM SCHOOL TO ADULT LIFE

Thomas Sherburne, Eric Rudrud, Robert Markve and Randall Morris

Transition is defined as movement from one environment to another. Transitions are marked by both physical and functional changes. Movement from a school environment to a work environment, for example, entails changes in the physical setting and the skills required in each setting. Also, success in a bakery requires different skills than attending school.

Education focuses on assisting students to successfully transition from school to adult life. Federal law now mandates special educators complete a transition plan for students with disabilities in secondary educational settings by age 16. However, students do not always transition to adult life successfully. Wright, Emener, and Ashely (1988) report that, since 1970, more than 2.5 million students with disabilities have left the public education system. Of these students, only 23% enrolled in college, 40% were underemployed and earned wages near the poverty level, and 26% were on welfare.

Others have reported that students with disabilities have significantly higher unemployment and underemployment than those without disabilities (Rusch & Phelps, 1987). To address the problem of unemployment and underemployment of persons with disabilities, the Developmental Disabilities Act (P.L. 98-527) provides support for such individuals in the work place. One popular approach to transition to adult work life is **Supported Employment**.

The purpose of this paper is two-fold. First, a brief overview of supported employment is presented in terms of its major models and their respective strengths and limitations. Second, two exemplary work programs in a rural setting are presented. These programs have implications for states that have rural geographic areas such as Alabama.

What is Supported Employment?

Supported employment is a *"place and train"* model, rather than *"readiness"* for work model.

Supported employment (SE) is defined as competitive employment in an integrated setting, working at least 20 hours a week and is characterized by serving individuals with severe disabilities (Wehmen & Moon, 1988). SE services include (a) job development, (b) job placement, (c) job training, and (d) on-going support services to help the person maintain employment.

SE is characterized by a zero reject rate; no person is too disabled to receive services for as long as necessary. Second, SE emphasizes that the job being completed by these persons should be socially valued. They should have jobs that pay at least minimum wage. Third, SE emphasizes that persons with disabilities should be employed in integrated settings. Fourth, SE support services are continued for as long as necessary. Fifth, SE is a *"place and train"* model, rather than *"readiness"* for work model. Individuals are not denied access to services because of their vocational weakness. Rather, the individual is employed in positions that match her or his vocational strengths and vocational weaknesses that are addressed on the job.

Supported Employment Models

There are several SE models, such as: (a) the individual placement model, (b) the enclave model, and (c) the mobile work crew model (Wehman, Moon, & Everson, Wood, Barcus, 1988). What follows is a brief description of each of these three models.

Individual Placement Model

Under this model, individuals are competitively employed by existing business and provided with a job coach who assists workers in learning the skills necessary for their position. Workers work at least 20 hours per week and are to be paid at minimum wage.

Enclave Model

Under this model, a group of 3 to 8 students are employed in an existing business setting and are accompanied by a job coach who provides training and supervision of the workers. Workers are paid at a rate relative to their production compared to the normal population completing the same job. Integration is provided through employee breaks and company social functions. Occasionally, one or two of the workers may be hired by the company, if their job performance is satisfactory.

Mobile Work Crew Model

Under this model, a group of 3 to 5 students is accompanied by a job coach and work in the community providing such services as lawn care, snow removal, and janitorial services. The workers receive training and supervision from a job coach and are paid by the agency providing the vocational services. The employment agency contracts with local businesses to provide such services. Workers are paid based on their production rate and performance. Integration with individuals without disabilities occurs in the community settings where the individuals work.

Model Limitations in Rural Areas

The preceding models of SE have been successfully implemented in a variety of urban and rural settings (Markve, Morris, Ferrara, & Rudrud, 1992). Nevertheless, there are limitations of these models in rural areas. Some of the reasons for these limitations are presented below.

- **Distances between work sites**. Students in rural areas may live in several geographically distant communities which makes delivery of services difficult and expensive. Their community, or adult service, may require students to spend the majority of the day in transportation to the job site or service provider. This concentrates individuals with disability near larger population centers and thus increase competition for employment.

  Furthermore, individual placement requires that the job coach make on-site training visits. Travel by the job coach is time consuming and expensive in rural areas. Also, travel time severely limits the types of jobs available and the number of jobs completed, as well as integration of mobile work crews. In other words, most of their time will be spent in transportation among work sites limiting the time spent working and interacting with persons without disabilities (Markve, Morris, Ferrara, & Rudrud, 1992).

- **Low population densities**: These three models severely impede the integration of students with disabilities integration with non-disabled peers. A mobile work crew, for example, may spend the majority of day in transition from one work site to another. Moreover, at the work sites, they may not encounter any persons without disabilities (Markve, Morris, Ferrara, & Rudrud, 1992).

- **Limited economic diversity**. Rural areas are characterized by a lack of economic diversity. This severely limits **all** models of supported employment. In essence, the number of jobs and the variety of jobs is limited, the possibilities for work sites is decreased, and competition for positions is higher (Markve, Morris, Ferrara, & Rudrud, 1992).

- **Lack of trained personnel**. Rural areas may lack vocational rehabilitation services. In other words, the services may be located in geographically distant communities. Moreover, those services may not be able to attract staff trained in SE and vocational rehabilitation, which may be due to scarcity of programs, and low salaries in rural communities. Thus, vocational rehabilitation services are difficult to deliver in rural areas (Markve, Morris, Ferrara, & Rudrud, 1992).

  Also, residential service providers are located in geographically distant communities and may require students to move away from their home communities. When this occurs, students lose valuable natural supports in their home communities, have to develop new relationships in their new community, and have to learn new skills required in the communities in which they live. In other words, they must make an unnecessary transition because of a lack of vocational and residential services.

Although all the models of supported employment have been successfully implemented in both urban and rural areas, the preceding constraints all are factors that impede students from successful transition to adult life. The Black Hills Special Services Cooperative (BHSSC) has designed and implemented two unique transition models that successfully overcome the constraints of these models.

Exemplary Rural-based Programs

Black Hills Special Services Cooperative (BHSSC) is a special education cooperative program serving 12 school districts in western South Dakota. The 12 school districts are located in a 10,000 square mile area of western South Dakota that is approximately 1,000 square miles, which is larger than the State of Vermont. Distance between the north to south boundary is 220 miles. The areas major economy focuses on agricultural, forestry, or mining. Also, businesses are small: 91% of business employs fewer than 19 people, and 80% employ fewer than 9 employees. Clearly, the area served by BHSSC exemplifies the contraints of providing transition services in rural areas.

Students are referred to BHSSC for specialized educational training and assessment by member school districts. However, each school district provides special education services to students who do not need specialized services. To enhance their students transition to adult life, BHSSC has begun (a) a unique "entrepreneurial" model of Supported Employment, and (b) the Life Skills Coaching Project.

The Entrepreneurial Model of Supported Employment

To overcome the rural constraints on employment of students with disabilities, BHSSC developed an Entrepreneurial Model of Supported Employment to enhance employment of their students. This model had to provide meaningful, socially valued work in integrated settings, while overcoming transportation issues and a limited number and variety of jobs available to students in rural areas. To accomplish this, BHSSC began four businesses that employ students with disabilities, as well as community members without disabilities.

To overcome the rural constraints on employment of students with disabilities, BHSSC developed an Entrepreneurial Model of Supported Employment to enhance employment of their students. This model had to provide meaningful, socially valued work in integrated settings, while overcoming transportation issues and a limited number and variety of jobs available to students in rural areas.

All students are paid minimum wage, or a piece rate which ever is higher, and receive appropriate job training and support in an integrated settings. Since the manufacturing sites were centrally located, transportation issues were minimized. Thus, the Entrepreneurial Model created the *"ideal"* employer in areas where none previously existed.

The Entrepreneurial Model was implemented in four sites--two specialized in textile manufacturing, and two in furniture manufacturing and woodcraft manufacturing. One-hundred and fifty special education students and 77 non-disabled persons are employed in four sites. The disabilities include mental retardation, autism, multiple disabilities, emotionally/behaviorally disturbed and range from the mild to the severe/profound range. More severely and profoundly mentally and physically impaired students are easily included with the assistance of BHSSC staff, who are trained to provide accommodations, adaptations, and behavioral supports for such students.

The first textile manufacturing plant, located in Sturgis, S.D., produces Tub Buddies Bath Puppets and Snooz Zoo products. The second textile manufacturing site located in Belle Fourch, S.D. manufactures Baseball caps with company emblems and insignia. The woodcraft manufacturing site located in Sturgis, S.D. manufactures children's furniture products and gunstocks. Each business is owned and operated by BHSSC.

All products from all three businesses are manufactured for national or international companies, who distribute and market them nationally. BHSSC enters into cooperative contracts with these companies to manufacture specific products that are then marketed and sold nationally.

Although the Entrepreneurial Model appears similar to a sheltered workshop, it differs from sheltered workshops in that students work side-by-side with other employees that are not disabled, and are paid minimum wage, or a piece rate, which ever is higher. Moreover, the sheltered workshop typically provides services regardless of the profitability of the workshop. Conversely, the entrepreneurial job continuously provides work. If a product that BHSSC manufactures is not profitable, it is discontinued and new products are research and developed.

Students participate in all aspects of the production, packaging, and shipping of products. The number of hours each student works at the site varies and is determined by the student's interdisciplinary team. Thus, students receive their vocational training as outlined by their IEP on the job. After graduation, students move on to competitive employment in their home communities. However, some students are hired by the business after graduation.

- **Advantages**. The Entrepreneurial Model, as implemented by BHSSC, has several advantages in rural areas.

  First, it increases economic diversity in an economically depressed area. It increases the number of jobs in the area for both students and other members of the community.

  Second, students receive valuable vocational training and job experience in a variety of positions. Thus, they have a record of employment prior to graduation and thus increasing their potential for employment after graduation.

  Third, it provides an "ideal" environment to provide job training for "hard to place" individuals. The employer (BHSSC) is able to accommodate and support these students by making environmental accommodations and behavioral supports easily. Moreover, these are easily implemented, since there is an open and positive attitude towards employing students with disabilities.

  Fourth, the entrepreneurial sites provide for integration of students, since they work side-by-side with non-handicapped students. Non-disabled production workers are paid to produce product--not to serve as vocational trainers.

  Fifth, the entrepreneurial model is fiscally responsible; it increases the tax base of the area, decreases unemployment, and its success is determined by the profit of the business. If a business is found to be unprofitable, then the manufacturing of the product is discontinued.

- **Limitations**. The major limitation of the Entrepreneurial Model is that it is expensive to start. BHSSC has overcome this problem by creative funding in cooperation with local, state, and federal agencies. BHSSC has collaborated with South Dakota Department of Special Education, Department of Vocational Rehabilitation, Department of Labor, Court Services, Veterans Administration, Bureau of Indian Affairs, U. S. Forest Service. For example, BHSSC decreased its start-up costs for textile manufacturing by entering into a cooperative agreement with the Veterans Administration for the purchase of industrial sewing machines. The cooperative interaction of these agencies has led to funding, needs assessments, and program direction. Also, major sources of funding have been provided by securing grants from the Office of Special Education, Projects with Industry, Jobs Training and Partnership monies, Carl D. Perkins Vocational Education funds, and local educational funds (Morris, Markve, & Rudrud, 1993).

  Even though the entrepreneurial sites are located in different communities throughout the BHSSC service area, some students may have to move away from their home communities to receive the vocational training. This creates difficulties because these student lose valuable social and natural supports. Furthermore, there may be no residential services in when they return to their home communities after graduation. To address this problem, BHSSC recently completed a three-year **Life Skills Coaches** demonstration project funded by a grant from OSERS.

Life Skills Coaching Project

The goal of the Life Skills Coaching Project was to provide the necessary transition services to students in their home communities. Specifically, it was directed toward those students who had been referred to residential placement outside of their home communities. BHSSC hired three Life Skills Coaches who provided (a) Supported Employment services, (b) Independent Living Training, and (c) Recreational and Leisure Skills Training in the students home community. The Life Skill Coaches traveled between the student home communities throughout the BHSSC service areas.

Table 1 describes the participants demographics. Table 2 describes services that Life Skills coaches provided. And, Table 3 describes the employment and independent living outcomes.

Table 1

Demographics of Life Skills Coaching Project Participants

Diagnosis*	Ethnicity	Gender	Ability Level
12 EBD**	33 Caucasian	27 Males	IQ 75.2 (r=49-110)
11 MR	10 Native American	17 Females	Reading: 4.9
7 MI	1 African-American		Math: 5.5 Grade
6 LD			
2 Turners			
1 Tourettes			
1 Chem Dependency			
1 Spina Bifida			
1 FAS			

* 38 had more than one diagnosis
** Emotionally/Behaviorally Disturbed

Table 2

Services Provided by Life Skills Coaches

Vocational Services	Independent Living Services	Community/Recreational Services
Vocational Assessment	Apartment-finding	Community Services
Job Development	Arranging for Utilities	AFDC/WIC
Job Placement	Moving In	Transportation
Job Coaching	Budgeting	Matching Recreational Interests
	Banking Skills	Arranging Socials
	Counseling	
	Laundry	

Table 3

Employment and Independent Living Outcomes for Life Skills Project

Employment		Independent Living	
Total Employed	41	Independent Living	22
Positions	84	Semi-Independent	10
Number of Employers	34	Family	12
Average Wage	$4.43		
Average Hours/Week	25.96		
Average Months Worked Position	5.5		
Total FICA Paid	$15,033		
Total Federal Taxes Paid	$27,798		

The main advantage of this program was that students were maintained in the home communities, and, the transition services were provided at a cost 75% less than similar services provided in a residential placement. Thus, for every five students receiving similar services in a residential school program, this program was able to provide services for 20 students without requiring them to leave their home communities. Even though the Federal funding for this project ended in 1993, BHSSC has become an adult service provider for the State of South Dakota.

- **Limitations**. There were two major limitations of the project. First, Life Skills Coaches had high amount of travel time. Second, there was a philosophical issue. One problem was that many of the participants became legal adults during the project. Thus, they could decide not to follow the guidance of their life skill coach. This resulted in some students running up enormous phone bills, having parties drinking, losing their leases, and eventually asking BHSSC to help them out. The issue that arose was at what point should the Life Skills Coaches intervene. Intervening would send the message that whatever the students did, they would receive help and they would not learn a valuable life skills. To the contrary, not intervening would create serious problems for the students. The project did not successfully overcome this problem.

Conclusion

Both the Entrepreneurial Model of Supported Employment and the Life Skills Coaching project have been successful in overcoming the barriers to successful transition in the rural area served by BHSSC. Similar programs may be equally successful in Alabama's rural areas. Alabama is largely rural and its economy is similar to South Dakota's. However, there are disimlarities, Alabama has a higher population density, and a larger business. These differences, however, would probably enhance the success of both the Entrepreneurial and Life Skills Models, in that more jobs and services would be available.

Although transition services are difficult to deliver in rural areas, creativity in program design and funding, collaboration with local, state, and federal agencies, and commitment to providing quality services to students has helped BHSSC students overcome the barriers to successfully transitioning their students to adult life in rural communities.

References

Baumeister, M., & Morris, R. (1992). Rural delivery model for vocational education. *Teaching Exceptional Children, 24*(4), 40-43.

Rusch, F., & Phelps, L. (1987). Secondary education transition from school to work: A national priority. *Exceptional Children, 53*(6), 487-492

Markve, R., Morris, R., Ferrara, J., & Rudrud, E. (1992). The entrepreneurial model of supported employment. *Rural Special Education Quarterly, 11*, 14-18.

Morris, R., Markve, R., & Rudrud, E. (1993). Collaboration, creativity, and creation: The three C's for rural rehabilitation. In *Impact, 6*, 6-7. Institute of Community Integration: University of Minnesota.

Wright, T., Emener, W., & Ashley, J. (1988). Rehabilitation counseling and client transition from school to work. In S. Rubin (Eds.), *Contemporary challenges to the rehabilitation counseling profession*. Baltimore: Paul H. Brookes.

Wehmen, P, Moon, M., Everson, J., Wood, W., & Barcus, J. (1988). *Transition from school to work: New challenges for youth with severe disabilities*. Baltimore: Paul H. Brookes.

SOCIAL SKILLS: TRANSITIONING STUDENTS WITH MILD LEARNING HANDICAPS

Virginia G. Chance

Many students with learning or behavioral difficulties are viewed as socially incompetent because of their behaviors (Carter & Sugai, 1989). As a result, the social skills of pupils with mild learning disabilities, behavior disorders, and mental retardation have been the subject of increased interest over the past few years. Because teachers and other personnel in special education have become all too familiar with the social problems these students face in their everyday lives, special education practitioners have come to realize that many students with disabilities do not spontaneously demonstrate appropriate social behavior in different environments (Sabornie & Beard, 1990).

Until recently, a major focus or emphasis on social skills instruction and curriculum development for mildly disabled individuals appeared unwarranted because their academic deficiencies seemed to be their most serious limitation. However, as stated by Shumaker and Hazel (1984), empirical evidence now is available indicating that social skills problems or deficits will remain with these students throughout their adult lives.

A social skill is defined as any cognitive function or observable behavior in which an individual engages while interacting with another person or persons. Cognitive functions include such capacities as empathizing with or understanding another person's feelings, discriminating and making inferences about social cues, and predicting and evaluating consequences for social behavior. Observable behaviors include nonverbal and verbal components of social performance.

Research indicates that the phenomenon of social dysfunction among mildly handicapped students occurs at approximately the same rate regardless of the age of the child, or the school and community settings in which the child functions. The consistency of social dysfunction at the elementary, junior high, and senior high levels also suggest that this problem is not being addressed and eliminated in our students and, therefore, persists at the same approximate rate among adolescent students (Baum, Duffelmeyer, & Geelan, 1988).

Difficulty with social skills is often part of the profile of a learning disability. During adolescence, this area becomes magnified and, if not addressed, it can interfere with vocational maturity well into adulthood (Brandt & Berry, 1991).

Because finding and keeping a job is the basic goal of all individuals seeking successful employment and integration into society, the social skills necessary for job retention must be targeted and taught to the secondary special education student (Test, Farebrother, & Spooner, 1988).

Definition and Importance of Social Skills

A social skill is defined as any cognitive function or observable behavior in which an individual engages while interacting with another person or persons. Cognitive functions include such capacities as (a) empathizing with or understanding another person's feelings, (b) discriminating and making inferences about social cues, and (c) predicting and evaluating consequences for social behavior. Observable behaviors include nonverbal and verbal components of social performance. Social competence involves a person's social skills which lead to positive consequences for himself and the person or people with whom s/he is interacting.

Social competence is seen as a composite of social skills such as discriminating situations in which social behavior is appropriate, determining which verbal and nonverbal skills are appropriate for a given situation, performing those skills fluently and in appropriate combinations, accurately perceiving the other person's verbal and nonverbal cues, and adjusting to this feedback (Schumaker & Hazel, 1984).

The inadequacy of necessary social skills, inappropriate behavioral excesses, and interpersonal relationship problems demonstrated by students with mild handicaps have been well documented

In behavioral terms, social skill is defined as the ability to exhibit behaviors that are either positively or negatively reinforced and to avoid exhibiting behaviors that are extinguished or punished by others. Very simply, a social skill may be defined as a behavioral competence in social situations (Center, 1989).

The inadequacy of necessary social skills, inappropriate behavioral excesses, and interpersonal relationship problems demonstrated by students with mild handicaps have been well documented (e.g., Sabornie & Beard, 1990). Since a deficit in the social skills area implies a lack of sensitivity to people and a poor perception of social situations, the deficit affects almost every aspect of the student's life and is probably one of the most crippling disabilities the student can have. In terms of total life functioning, the social problem may be far more disabling than academic deficits (Lerner, 1990).

Not only do social skills deficits interfere with successful adjustments to the peer group and educational mainstream (Nelson, 1988), they also are predictive of long-term maladaptive behavior patterns including delinquency, dropping out of school, military discharges for bad conduct, and adult mental health problems (Sabornie & Beard, 1990).

Social skills deficits, special education curriculum deficiencies in current social issues, and cognitive deficiencies in mild handicapped students all are contributing factors in making them more vulnerable to negative social forces (Fine, 1989). Because adolescents and young adults are faced with pressing social issues, for example, gang membership and drug use, logical thinking skills are needed by all students. The disabled student must be taught the specific social skills and information on social issues in order to prevent simple social appeal from becoming the primary basis for making decisions (Hamricks, 1991).

Finally, skillful social behavior has been identified as an important factor in performing and maintaining a competitive job (Park & Gaylord-Ross, 1989). Several studies on employer attitudes for hiring both learning disabled and mildly retarded students indicate that reasonable adjustments or compensations are made to provide extra time or instruction in job performance. However, social skills deficiencies, inappropriate behaviors, and poor communicative skills were cited as the least tolerated by employers of the mildly handicapped (Minskoff, Sautter, Hoffman, & Hawks, 1987; Shafer, Hill, Seyfarth, & Wehman, 1987).

The willingness of employers and co-workers to put up with these disabilities was very low. The deficits in social and communication skills were suggested as significant factors contributing to the inability of the mildly handicapped to retain jobs (Park & Gaylord-Ross, 1989; Test, Farebrother, & Spooner, 1988).

Obviously, not all students with mild learning handicaps require assessment and intervention in all facets of social skills training. Many special education students already have adequate or superior skills needed for successful independent functioning and social interactions. Evidence is mounting, however, to suggest that to assume that these students' social skills require no attention is not only unwarranted but also professionally irresponsible. Functional communication skills, social skills, career-vocational skills, and other daily living and self-care skills are of equal value (if not greater) than reading, writing, and mathematics skills for persons with learning handicaps (Leigh, 1987).

Teaching Methods and Procedures

The non-disabled student is able to learn social skills through daily living and observation, but the student with a deficit in social skills needs conscious effort and specific teaching to learn about the social world, its nuances, and its silent language. Students with social disabilities appear to be unable to make appropriate responses in social situations without direct teaching. Social skills training has an important place in the curriculum of these students (Nelson, 1988). Methods of social skills training for children and youth are similar to those that are successful for other areas of learning, including direct instruction, prompting, modeling, rehearsal, and reinforcement (Carter & Sugai, 1988).

The non-disabled student is able to learn social skills through daily living and observation, but the student with a deficit in social skills needs conscious effort and specific teaching to learn about the social world, its nuances, and its silent language. Students with social disabilities appear to be unable to make appropriate responses in social situations without direct teaching. Social skills training has an important place in the curriculum of these students.

Although social skills training packages are increasingly available, and research has indicated that these do not promote handicapped students' social competence over time or across settings (Nelson, 1988). The primary reason for this lack of maintenance and generalization is viewed by many as problems with the instruction taking place in artificial settings and insufficient experience with socially competent peer models. Disabled students must be taught to exhibit behaviors that will be reinforced naturally by peers and which will contribute to the development of social competence (Gresham, 1986). Social skill instruction should take place in vocational settings and other normalized environments. This poses a dilemma, however, since professionals are accustomed to implementing such instruction are often in restrictive classroom environments.

In social skills training, the importance of training behaviors during a role play or classroom rehearsal is secondary to having these behaviors generalize to the real setting on the job or in the community. For example, in job interviewing as a social skill, it would be critical to produce generalization from the role play to real job interviews (Gaylord-Ross, 1990).

One of the most serious programming considerations is the question of how to arrange instruction so that social skills will transfer to and be maintained outside the instructional setting. Suggestions for promoting generalization and maintenance can be grouped into two categories: (a) those designed to prepare individual students to use acquired behaviors in "natural" settings, and (b) those aimed at programming other environments to support these new behaviors (Carlson, 1987; Clement-Heist, Siegel, & Gaylord-Ross, 1992; Nelson, 1988).

A critical factor in the generalization of social skills is selecting social behaviors that are functional in integrated vocational and social environments. Behaviors that employers and peers view as important should be targeted, but social skills that naturally elicit desired responses from peers and adults should receive priority. The home environment constitutes a major but often ignored generalization setting and should be included in all program planning of social skills (Calhoun & Beattie, 1987).

Undesirable behaviors should be evaluated with regard to whether or not they normally occur in nonhandicapped peers, or whether their occurrence in employment settings would not be tolerated. Keeping in mind that levels or types of behavior that might be acceptable when displayed by adults who have no disabilities often are not accepted at any level in those identified as handicapped, deviant social behaviors should be reduced to the lowest possible rates before vocational placement is considered (Carlson, 1987; Center, 1989).

Ethical Concerns

A serious limitations of the social skills training literature is that research has failed to demonstrate that community integration and adjustment can be enhanced through such training. It is no surprise that behavioral strategies are effective in promoting the social responses of persons with mild handicaps. The critical question, however, relates to the impact of social learning interventions on such persons' community adjustment. Do social skills training interventions facilitate normalization? Are social skills training procedures effective in increasing access to competitive work placements? Does social skills training result in a broader range of stable social relationships? In general, is the long-term and overall quality of life for mildly handicapped persons improved by social skills training programs? Future research must develop a data-base which parallels skills development with maintenance information and long-term overall quality of life (Carter & Sugai, 1989).

Social skills training should not be considered a mandatory part of the curriculum of the special education student in transition planning, because (a) there is no empirical evidence that social skill training positively impacts the individual's lives, (b) some mildly handicapped individuals may not need social skills training, and (c) all handicapped individuals need remediation in a variety of other deficit areas. Thus, due to the uncertainty of the long-term outcome of social skills training, parents and handicapped individuals must be carefully informed about the information available regarding the benefits of social skills training. Other skill deficits must be carefully weighed against social skill deficits, and instructional time should be assigned accordingly through the IEP process with active involvement of the parents and the student.

Parents and significant others in the students' environment should be informed of the social skills being trained. At a minimum, parents and others must be told how the youth may be expected to behave in certain kinds of situations in the future and how they can encourage the use of newly earned social skills. Such communication will prevent the youth from being punished for "acting differently" than in the past and may promote reinforcement for social skill use in the natural environment. Recent research has shown that youths learned and maintained their use of the skills at post-training levels longer than youths whose parents were not involved in the training.

Participants should be fully informed about what to expect when they use newly learned skills. For example, they must be prepared to encounter many individuals who are not socially skilled and who may be unreasonable. Along with learning how to negotiate, they also need to know how to recognize a situation where an issue is not negotiable. Along with knowing how to make friends, they must know how to discriminate among individuals who are not open to friendships with them (Sabornie & Beard, 1990).

Finally, the most important of the ethical issues with social skills training involves the "value-laden" aspect of the subject. Teaching a youth to make friends, or get along with others, places a positive value on such activities. Some cultures value certain social skills more than others. Some social skills mean different things in different cultures and in different employment settings. Consequently, anyone involved in social skill training must take such considerations into account when designing skills to teach and in responding to youth's feedback about the skills. Social skill training should be presented as a way of increasing an individual's options in social situations. Skills should not be presented as the "only" way to behave. Informing parents, in advance, of the skills to be taught gives them the opportunity to negotiate any behaviors that are inconsistent with their own beliefs and values. This will provide parents with the opportunity to review procedures that will be used to teach social skills and the ways they can reinforce these skills at home (Nowacek, 1988; Schumaker & Hazel, 1984).

Conclusion and Summary

Most of the descriptions of mildly handicapped children, adolescents, and adults mention their inability to use appropriate social behavior. Inadequacy in the social skills area has a great impact on their lives (both in and out of school), as well as in transitioning to adulthood. Persons who do not behave, respond, or react as expected may be perceived as tactless and stupid. They often are rejected, which can then lead to their withdrawal, hostility, and loss of employment. As a result of the compounding effect of poor social skills, handicapped individuals tend to have new friends, problems with family relationships, difficulty with teacher interactions, and a poor self-concept. The student with a disability may feel incompetent, a feeling that seems to be validated, since research indicates that these students are viewed more negatively by teachers and parents, as well as experience increased instances of rejection than their non-disabled peers.

Because of the pervasive effect poor social skills can have on the lives of people with disabilities, perhaps we should rethink what skills are most relevant and useful. If we should train students to be independent, then a systematic social skills curriculum should be given high priority in their educational programs.

Carefully articulated strategies are essential to ensure that a merger of both special and regular education delivery systems will accomplish the goal of improving social skills. The technology for teaching appropriate social behaviors is available, but the implementation of effective programming for maintaining and generalizing these skills in a more normalized vocational setting lags behind. A comprehensive vocational training program which includes individualized social skills training for youth with special needs may enable them to be better prepared for competitive employment as they approach the transition from school to work (Gaylord-Ross, 1990).

References

Baum, D., Duffelmeyer, F., & Geelan, M. (1988). Resource teacher perceptions of the prevalence of social dysfunction among students with learning disabilities. *Journal of Learning Disabilities, 21*(6), 380-381.

Brandt, M., & Berry, J. (May, 1991). Transitioning college bound students with LD. *Intervention in School and Clinic, 26*(5), 297-301.

Calhoun, M., & Beattie, J. (1987). School competence needs of mildly handicapped adolescents. *Adolescence, 22*(87), 555-556.

Carlson, C. (1987). Social interaction goals and strategies of children with learning disabilities. *Journal of Learning Disabilities, 20*(5), 306-310.

Carter, J., & Sugai, G. (1989). Social skills curriculum analysis. *Teaching Exceptional Children*, 36-39.

Clement-Heist, K., Siegel, S., & Gaylord-Ross, R. (Feb. 1992). Simulated and in situ vocational social skills training for learning disabled youth. *Exceptional Children, 58*(4), 336-45.

Center, D. (1989). *Curriculum and teaching strategies for students with behavior disorders*. Prentice Hall, Inc. Englewood Cliffs, New Jersey.

Fine, E. (1987). Are we preparing our learning disabled adolescents to cope with social issues? *Journal of Learning Disabilities, 20*(10), 633-634.

Gaylord-Ross, R. (1990). *Readings in ecosocial development*, San Francisco State University, California. (ERIC document reproduction service no. Ed 327 990).

Gresham, F. (1986). Conceptional and definitional issues in the assessment of children's social skills: Implications for classification and training. *Journal of Clinical Child Psychology, 15*(1), 3-15.

Hamrick, J. (1991). *Youth gangs: Adolescents as victims.* Presented at the Alabama Council for Exceptional Children's Superconference. Tuscaloosa, Alabama.

Leigh, J. (1987). Adaptive behavior of children with learning disabilities. *Journal of Learning Disabilities, 20*(9), 557-562.

Lerner, J. (1989). *Learning disabilities theories, diagnosis, and teaching strategies.* Houghton Miflin Company, Boston.

Minskoff, E., Sautter, S., Hoffman, F., & Hawks, R. (1987). Employer attitudes toward hiring the learning disabled. *Journal of Learning Disabilities, 20*(1), 53-57.

Nelson, C. (1988). Social skill training for handicapped students. *Teaching Exceptional Students*, 19-22.

Park, H., & Gaylord-Ross, R. (1989). A problem-solving approach to social skills training in employment settings with mentally retarded youth. *Journal of Applied Behavior Analysis, 22*(4), 373-380.

Sabornie, E., & Beared, G. (1990). Teaching social skills, *Teaching Exceptional children*, 35-38.

Schumaker, J., & Hazel, S. (1984). Social skills assessment and training for the learning disabled: Who's on first and what's on second? part I. *Journal of Learning Disabilities, 17*(7), 422-429.

Schumaker, J., & Hazel, S. (1984). Social skills assessment and training for the learning disabled: Who's on first and what's on second? part II. *Journal of Learning Disabilities, 17*(8), 492-499.

Shafer, M., Hill, J., Seyfarth, J., & Wehman, P. (1987). Competitive employment and workers with mental retardation: Analysis of employer's perceptions and experiences. *American Journal of Mental Retardation, 92*(3), 304-311.

Test, D., Farebrother, C., & Spooner, F. (1988). A comparison of the social interaction of workers and without disabilities. *Journal of Employment Counseling*, 122-130.

TRANSITION OF INDIVIDUALS WHO ARE DEAF
or
HARD of HEARING:
A Literature Profile

Linda Schumaker

Allen, T., Rawlings, B., & Schildroth, A. (1989). *Deaf students and the school to work transition*. Baltimore: Paul H. Brookes Publishing.

(from the cover) The first comprehensive study of severely and profoundly hearing-impaired youth, "Deaf Students and the School to Work Transition" discusses laws and regulations, reviews available services, examines existing relationships between educational programs and vocational rehabilitation agencies, and provides parents' perspectives on the transition process. Prepared by researchers in the field of hearing impairment, this innovative resource focuses on the "reality" of transition. Current legislative, public policy, and systems initiatives are explored, in addition to employment realities for individuals who are hearing-impaired. From first-person accounts by parents of young people with hearing impairments to data from unique national surveys on transition, this valuable research guide provides additional insight into smoothing the transition process.

Bull, B., & Bullis, M. (1991). A national profile of school-based transition programs for deaf adolescents. *American Annals of the Deaf, 136*(4), 339-348.

Reports the results of a survey of 326 secondary education programs for adolescents who are deaf and severely hearing-impaired. Residential and mainstream programs were surveyed. The goal of the survey was to establish a profile of transition programs nationally. Respondents were asked to rate the value of several items and also whether the items had been implemented in their programs. The survey covered five general areas: curriculum and instruction, documentation, transition planning, administrative support, and adult services. All of the programs valued the survey items more than they implemented them. The residential schools had higher implementation rates than the mainstream or other programs. This survey indicates that there is a need to encourage more interaction between schools and adult service agencies, and to provide schools with information to assist them with implementing transition programs.

Bullis, M., & Reiman, J. (1990). Development and preliminary psychometric properties of the transition competence battery for deaf adolescents and young adults. *Exceptional Children, 59*(1), 12-26.

This article outlines the development and preliminary psychometric properties of the Transition Competence Battery for Deaf Adolescents and Young Adults (TCB). The TCB is a 3-option multiple choice test which has both written and videotaped instructions. It has three subtests on employment and three subtests on independent living. Students from both mainstream and residential settings were used to standardize the instrument.

Bullis, M., & Watson, D. (Eds.). (1984). *Career education of hearing-impaired students: A review.* Arkansas: Rehabilitation Research & Training Center for Deafness/Hearing Impairment.

Contributing authors review efforts that have been made to develop and refine career preparation services for individuals with hearing impairments. The titles of the six articles and appendix are:

1. Career Education: A Literature Review
2. A Current Profile of Career Education Programs
3. A Dilemma: Who and What to Teach in Career Education Programs?
4. Vocational Decision-making: A Career Education Approach
5. Where Do We Go from Here?
6. A Directory of Career Education Curricula Used in State Schools and Postsecondary Institutions

Davis, C., & Bullis, M. (1990). The school-to-community transition of hearing-impaired persons with developmental disabilities: A review of the empirical literature. *American Annals of the Deaf, 135*(5), 352-363.

This literature summarizes 43 empirical studies of the school-to-community transition of individuals who are deaf or hearing-impaired and developmentally disabled. The studies chosen were conducted between 1975 and 1989. The areas discussed include: demographics, educational practices and procedures, career/vocational preparation, independent living skills, social/interpersonal behavior, communication, assessment and evaluation, family issues, service-provider training and programs, and community outcomes. The authors found many gaps in the research and recommend conducting more research on this population. They also point out some weaknesses in the empirical research and suggest several ways these can be rectified. It is pointed out that a significant amount of the research on this population is published in nondeafness-related journals. The authors recommend that more research in this area be reported in deafness-related journals so that it will be more readily available to individuals in the field.

Gough, D. (1990). A transition program for hearing-impaired students: Their perceptions of the process of change. *Journal of the American Deafness and Rehabilitation Association, 24*(1), 12-22.

This qualitative study examines ten hearing-impaired students' perceptions of their personal changes during a year-long transition program. All ten of the students had a severe to profound bilateral hearing loss. Eight of them had been mainstreamed in the public school system throughout elementary school and high school. The ten young adults participated in three in-depth interviews at the beginning, middle, and end of the program. They were also observed during daily activities. Several themes were found to be consistent across informants. These included issues of identity (did they see themselves as deaf?), personal values, family and social relationships, communication style, plans and expectations for the future, and perceptions of change.

Harmon, M., Manlon, S., & Beach, R. (1992). Model transition process for deaf and hard-of-hearing youth. *Journal of the American Deafness and Rehabilitation Association, 26*(1), 1-12.

Examines the needs of deaf and hard-of-hearing students in moving from school to adult life. A community outreach program in Arizona has developed a transition model which emphasizes a student-centered team approach. The team includes the student and the significant adults in his/her life. This team assists the student with all aspects of transition, including independent living skills, vocational skills and goals, and development of community resources. This model stresses allowing the student to develop their goals. The other members of the team then assist by determining ways to help the student reach those goals. Examples of adult team members include school staff, vocational rehabilitation staff, training program staff, counselors, and parents.

King, S. (1990). Comparing two causal models of career maturity for hearing-impaired adolescents. *American Annals of the Deaf, 135*(1), 43-49.

The question examined in this study is whether a separate theory of career development is needed, exclusively for individuals who are hearing-impaired. Two causal models of career development were developed. The second of these included five variables exclusive to individuals who are hearing-impaired. It is suggested that the second model is more descriptive of the career development process for individuals who are hearing-impaired but, statistical analyses did not confirm the need for a separate theory of career development for those individuals.

Menchel, R. (1984). Preparation for the world of work. *The Volta Review, 86*(5), 71-84.

This article is a discussion of the issues relating to preparing the individual who is deaf or hearing-impaired for employment. The author outlines the history of vocational education and employment of the deaf, and discusses current activities and needs in these areas. Also discussed is the process of preparing for, entering, and transitioning from postsecondary training programs. The conclusions include that the hearing-impaired person needs a solid foundation, that preparation needs to begin at an early stage in development, that career development is a lifelong process, and that the individual with the hearing impairment must be actively involved in the decision-making process.

Long, G., Ouellette, S., Andrews, M., & Harvey, M. (1988). Families in transition: Issues for deaf adolescents and their families. In D. Watson, G. Long, M. Taff-Watson, & M. Harvey (Eds.), *Two decades of excellence: A foundation for the future*. Little Rock, Arkansas: American Deafness and Rehabilitation Association.

According to the Ericksonian perspective, the adolescent has two overriding tasks to accomplish. They must develop a personal identity and a capacity for intimacy. This article explores the family's involvement in the solving of these tasks. The authors discuss the issues of independence, vocational choice-making, sexual roles, and intimacy for the adolescent. These issues are discussed within the framework of the transition from school to adult life.

Phillippe, T. (1985). Career development among deaf persons. *Journal of the American Deafness and Rehabilitation Association, 19*(1-2), 9-17.

Although this article does not discuss adolescents per se it is about the entrance of deaf individuals into the work force. The author outlines several issues that influence the vocational attainment of deaf individuals. These issues include special developmental issues (such as the presence of other disabling conditions in addition to deafness), educational issues, employment issues, and rehabilitation and career-counseling issues. Professionals in the field must consider experiential deficits and developmental lags in these areas. The author recommends the use of actual job try-outs in a variety of work settings to provide learning experiences for the client and diagnostic information for the counselor. He also emphasizes the need for appropriately training counselors who specialize in this population and have the ability to community effectively with them.

Schroedel, J. (1992). Helping adolescents and young adults who are deaf make career decisions. *The Volta Review, 94*, 37-46.

Reviews research dealing with career decision-making among young adults who are deaf. Points out the deficits that exist in career decision-making ability and career education among deaf adolescents. Focuses on the roles of parents, school personnel, vocational rehabilitation agencies and employers in facilitating the student's career development. Makes recommendations for each of these areas to enhance this process.

Schroedel, J. (1991). Improving the career decisions of deaf seniors in residential and day high schools. *American Annals of the Deaf, 136*(4), 330-338.

Interviewed 189 seniors from 16 residential and day high schools to determine if career development interventions have positive effects on the career decisions of deaf seniors. School staff evaluated the seniors' career decisions, career decision-making skills, and probable post-high school placements. This study indicates that there are several factors that influence seniors' career decisions including career counseling, vocational training, career education courses, and the availability of postsecondary placement options in their area. The study indicated that all of these factors increased the seniors' ability to make sound decisions. Therefore, the case is strengthened that whatever can be done to enhance the capacity of high schools to offer meaningful career development activities is a worthwhile investment.

Schroedel, J., & Carnahan. (1991). Parental involvement in career development. *Journal of the American Deafness and Rehabilitation Association, 25*(2), 1-12.

This study sought to answer three questions. These questions were how much discourse about future plans occur between parents and their deaf adolescents, what are characteristics of the individual and their family that might influence parental involvement in future planning, and what techniques do parents use to help their child prepare for the future. One hundred eighty-nine students who are deaf from 16 residential and day high schools were interviewed. Their parents were surveyed by mail.

Schildroth, A., Rawlings, B., & Allen, T. (1991). Deaf students in transition: Education and employment issues for deaf adolescents. *Volta Review, 93*(5), 41-53.

Examines issues that affect the deaf adolescent's transition from school to adult life. These include the characteristics of these youth, their schools, their training, and the availability of vocational rehabilitation services. The article also considers conditions within the labor market which have relevance for deaf youth.

Sendelbaugh, J., & Bullis, M. (1988). Special education and rehabilitation policies for the school to community transition of students with hearing impairments. *Journal of the American Deafness and Rehabilitation Association, 21*(4), 15-20.

A total of eighty-six vocational rehabilitation agencies and special education agencies responded to a survey on the transition, from school to community, of students with hearing impairments. The survey covered state-level transition agreements, definitions of client/student hearing loss, educational personnel involved in transition, rehabilitation personnel involved in transition, and cooperative planning in residential and mainstreamed settings. Survey results suggest that there are large gaps in transition services for students with hearing impairments and that special education and vocational rehabilitation must communicate and work together to fill these gaps.

Watson, D. (1987). Charting the transition from school to adulthood. *American Annals of the Deaf, 132,* 346-349.

This article discusses a model for the transition of students who are deaf or hearing-impaired from school to adulthood. The author focuses on three central players in this process: the school, the student/parents and the state vocational rehabilitation agency. A team approach to the transition process is encouraged. The transition team would include representatives of each of the above-mentioned groups. This team would develop a written individual transition plan for each student. The plan could be incorporated into the Individual Education Plan (IEP), the Individual Rehabilitation Plan (IWRP), or could be a separate document. The article also discusses the need for a structured plan for implementation at the state, school district, and local levels and the need to develop training programs to train staff to implement the programs.

BEST COPY AVAILABLE

AUBURN'S
MASTER'S PROGRAM IN SPECIAL EDUCATION
with an emphasis in
SECONDARY EDUCATION AND TRANSITION [1]

Caroline Dunn

Typically, K-12 teacher certification programs provide limited instruction on the unique needs of secondary special education students. This practice is contrary to the literature, which speaks to the necessity to change the role of the secondary educator, and underscores the need to improve programs for secondary students with disabilities.

Alabama requires K-12 teacher certifications. Auburn's master's program is a "first" for our state in that it is specifically designed to prepare teachers at the secondary level. The program has the enthusiastic endorsement of our State Department personnel, who helped us to tailor it according to existing state teacher certification standards. Along with our Director of Special Education Services, we too believe that it has the potential of being an innovative "model program" for other preparation programs in Alabama (and like states).

The goal of this new preparation grant is to impact our secondary special education programs in Alabama. Specifically, our purpose is to improve the quality and increase the quantity of secondary teachers serving students with mental retardation, learning disabilities, or behavior disorders. At the conclusion of this five year project, 40 (plus) teachers will have been "well trained" in transition to teach secondary students in these disability categories.

Evidence of Need

First, the special education teacher shortage problems facing us in Alabama are indeed immense. While the number of special education students has increased by 3.3 % over the last five years, the number of teachers has declined by 9.4%. Recently, 462 vacant positions existed for special education teachers, and, even though all of these positions had been previously funded, qualified personnel could not be located in order to fill them.

Second, we have an urgency to improve the quality of our secondary teachers. Our state's *Special*

---

[1] This is a new five year preparation grant (#H029B40156) funded from the Office of Special Education and Rehabilitative Services, U.S. Department of Education

A more extensive account of the nature of this newly funded program is presented in the Conference Proceedings for **Transition III** (pages 76-91), and:

Browning, P., & Dunn, C. (1993). Teacher preparation with an emphasis at the secondary level. *Alabama Council for Exceptional Children Journal. 11*, 3-12.

Education Advisory Panel noted in 1992, for example, that Alabama has a strong need for "well-trained" secondary special education teachers in transition. In addition, Auburn's recent statewide studies substantiate this "quality problem."

Program Objectives

1. **Program Curricula**. To develop new secondary transition-related courses and refine ones currently being taught.

2. **Recruitment and Selection**. To recruit each year no less than six (6) full-time and five (5) part-time students, and thus graduate 40 (plus) certified teachers in mental retardation, learning disabilities, or behavior disorders with a specialty in transition. Also, each year no less than four minority students will be aggressively recruited into the program.

3. **Program Implementation**. To implement the master's certification program through (a) instruction, (b) "intensive" practica supervision for three quarters in both urban and rural settings, (c) the completion of a field-based transition project, and (d) full participation in our Annual Statewide Conference on Transition.

4. **Teacher Leadership**. To prepare and assist our graduates to serve as a demonstration resource for other secondary special education teachers within their educational region.

5. **Placement of Graduates**. To provide a mechanism to help ensure that our graduates will be employed (a) in both rural and urban secondary classrooms, and (b) within each of our 12 educational regions.

6. **Program Evaluation**. To ensure that the program objectives are met by employing three major evaluation strategies.

7. **Model Dissemination**. To disseminate the program's model and outcomes to other higher education programs facing similar K-12 certification challenges.

This 60 quarter hour master's program meets our state's requirements in five basic areas: (a) Curriculum and Teaching, (b) Foundations of Professional Studies, (c) Evaluation of Teaching and Learning, (d) Teaching Field, and (e) Practica. Within this framework, our program is innovative in that the curricula includes:

> **(a) an array of knowledge-based training activities in transition, (b) three (3) quarters of intensive practica experiences in a wide variety of transition-related settings (urban and rural), (c) a field-based project in transition, and (d) full participation in our annual statewide conference on transition.**

Finally, the transition portion of our curriculum is targeted to the content areas of (a) Functional Assessment and Curricula in Transition, (b) Vocational and Community Preparation, (c) Self-Determination/Family Involvement, and (d) Interagency Cooperation.

Master's Program in Special Education

with an emphasis in

Secondary Education and Transition

Auburn University
College of Education
Department of Rehabilitation and Special Education

Program

This Master's Program in Special Education is unique in that it provides an emphasis in **Secondary Education and Transition.** The curriculum for this innovative training program offers a series of concentrated courses and field-experiences unique to secondary students and young adults in transition. In addition to typical Master's course work for teacher training programs, this "certification" program also includes course work in five content areas: (a) foundations of transition, (b) functional assessment and curricula, (c) vocational and community preparation, (d) self-determination and family involvement, and (e) interagency collaboration. The program also requires a series of three practica, each with a different focus: secondary curricula, community work experience, and interagency collaboration and participation.

Students

Individuals with an undergraduate degree in special education or general education can typically complete the program in one year of full-time study. Individuals with undergraduate degrees in other areas also are encouraged to apply, including those in rehabilitation, psychology, and other content areas (e.g., history, English, math). Teacher certification for these individuals may take up to two additional quarters of study.

Financial Support

This training program is financially supported by a grant awarded from the Office of Special Education and Rehabilitative Services, U.S. Department of Education. Significant financial support is available for both full-time and part-time students. Support includes tuition, fees, and a monthly stipend for up to six full-time and five part-time students each year.

Contact

Caroline Dunn, Ph.D., Program Director
Rehabilitation and Special Education
1234 Haley Center
Auburn University, AL 36849-5226

(205) 844-5943
(205) 844-2080 (FAX)

Auburn University is an Equal Opportunity Educational Institution and Employer

AUBURN'S
UNDERGRADUATE REHABILITATION PROGRAM
with an emphasis on
JOB COACHING [1]

Clarence Brown

In 1990, the National Council on Rehabilitation Education and the Rehabilitation Services Administration co-sponsored a national conference. As part of their **Rehabilitation Challenges for the Nineties** agenda, Action Groups were assembled to address educational programs at the undergraduate, master's and doctoral degree level. The Undergraduate Group offered the following two mission goals for undergraduate rehabilitation education programs (*Human Resource Development: Rehabilitation Challenges for the Nineties*, 1990).

> **Goal #1**: To prepare bachelor-level graduates to provide broad-based rehabilitation-related services that do not require a graduate degree for a variety of work settings where services are provided to persons with disabilities.
>
> **Goal #2**: To prepare students with broad-based rehabilitation-related skills and knowledge to enter various rehabilitation-related graduate programs.

Project Objectives

1. **Recruitment and Selection**: To recruit and select each year no less than 10 full-time students into the undergraduate program for each of the grant's three years, and thus to graduate 30 (plus) rehabilitation service providers who are prepared for either (a) immediate employment careers in rehabilitation, and/or (b) entry into graduate programs in rehabilitation and allied professions. Also, each year no less than three (3) minority students will be recruited and selected into the program for 9 (plus) graduates.

An innovative feature of our rehabilitation program is that the student's financial support is tied to their serving as "job coaches" for individuals with severe disabilities. Specifically, following their two academic quarter hours of practicum, students will receive hourly pay for up to 400 hours as job coaches in the community. As such, Auburn will be able to provide the immediate community and surrounding areas with up to 35 part-time job coaches a year.

2. **Program Curricula:** To meet the National Council for Rehabilitation Education (NCRE) standards for four-year baccalaureate rehabilitation programs by requiring (a) two years of Foundation Studies,

---

[1] This new three-year grant (#H129L40009) entitled, *An Undergraduate Rehabilitation Program with a Community-based Emphasis*, was funded by the Office of Special Education and Rehabilitative Services, U.S. Department of Education.

(b) one year of a "core" Rehabilitation Curriculum in accordance with specified NCRE topical study units, (c) a Field-Based Experience, and (d) one year of course Electives.

3. **Program Implementation**: To implement our undergraduate rehabilitation program through (a) faculty-student advisement, (b) course instruction, (c) intensive field-based supervision, and (d) an array of on-going rehabilitation events and activities.

    - **Advisement**: To provide each undergraduate major with substantial individualized rehabilitation career guidance through faculty-student advisement. This procedure will be employed for each student for no less than seven (7) times a year, four of which precede the beginning of each of the university's four quarters.

    - **Instruction**: To provide instruction to equip students with knowledge-based competencies, intervention methods and techniques, and technology that are appropriate for a wide array of careers in the field of rehabilitation services.

    - **Practica**: To provide "extensive" practica experiences and supervision for two (2) quarters (in both rural and urban settings) so that students can acquire the practical applications of what they learned in the classroom.

    - **Internship**: To require students to satisfactorily complete a "full-time" field-based internship in a rehabilitation setting for one entire quarter.

    - **Rehabilitation events and activities**: To strongly encourage students to partake in an array of events and activities, including (a) Auburn's Student Rehabilitation Club, (b) our Disability Awareness Week, (c) Alabama's Rehabilitation Association Conference, and (d) Auburn's Annual **"Transition from School-to-Work"** Conference.

Field-based Experiences

A major strength of Auburn's undergraduate rehabilitation program is its (a) practicum field-based requirement for 10 hours (two academic quarter units), and (b) its internship requirement for 15 hours (or one full academic quarter). The first five-hour practicum is designed to give our students a **"wide diversity"** of exposure to programs for people with handicapping conditions. We use 20 approved sites for this first practicum. The second five (5) hours of practicum are designed to provide **"skill development"** in the chosen specialty area. We use six (6) such approved sites for this second practicum. Finally, since 1990, we have used a total of 32 sites in which our students have performed their internships. Again, in addition to these field-based experiences, students have the opportunity to get their financial assistance by serving as **"job coaches"** for up to 400 hours per student.

DISTANCE EDUCATION: ANOTHER AUBURN STRATEGY for TRAINING in TRANSITION [1]

Philip Browning, Caroline Dunn, Linda Shumaker, and Karen Rabren

One important way to improve to quality of transition services for youth with disabilities is through the professional preparation and continuing education of all transition stakeholders (e.g, special, vocational, and regular teachers; school and rehabilitation counselors; jobs coaches; families; and other interested persons). Auburn University has assumed a leadership role in providing such training to Alabama's transition personnel.

First, since 1991, it has held the statewide *Alabama in Transition Conference* that now has served over 1,400 stakeholders (Browning, 1992, 1993, 1994). Second, it is implementing a new five-year OSERS Master's level preparation grant for an *"Innovative Program for Training Teachers at the Secondary Level"* (Browning & Dunn, 1993). Third, through a three year RSA funded preparation grant, its undergraduate Rehabilitation Program will be responsible for supplying the surrounding community with approximately 35 job coaches a year. The undergraduate students will be receiving their financial assistance by serving for up to 400 hours each as job coaches under the university's supervision.

The fourth and most recent preparation strategy will utilize Distance Education as the medium for learning. Specifically, the Department of Rehabilitation and Special Education has been awarded a three year OSERS's grant entitled *"Using Distance Education to Improve the Quality of Transition Providers"* (Browning & Dunn, 1994).

The purpose of this paper is to describe this personnel preparation strategy and the nature of the training program to be developed and implemented throughout the state (and nation). The reader is provided an overview of distance education as a learning medium and the innovative model that will be employed. The support for and interest in this training project is presented based on the results of a statewide survey with Alabama's Transition stakeholders.

Distance Education

> ***There is little question that long distance learning is in the forefront of training for today's needs . . . We must seriously consider the ways in which to increase our knowledge and skills in this area so as to be able to offer high quality education through these modalities [long distance learning techniques]*** (Eldridge, 1992, *Excellence in Rehabilitation Education* (p. 95).

---

[1] This is a new three-year grant (#H029K40035) funded from the Office of Special Education and Rehabilitative Services, U.S. Department of Education.

This paper appears in the 1994 Summer Issue of the *Alabama Council for Exceptional Children Journal, 11*(2), 32-37.

There is a growing use of distance education by adults whose educational needs are not fully met by more traditional educational methods (Clark, 1991; Garrison, 1989; Holmberg, 1989). The purpose of this section is to discuss Distance Education in terms of its (a) background, (b) benefits, (c) the innovative model, and (d) the mechanism for its transmission.

Background

Distance education has four defining elements. These elements are (a) the separation of teacher and learner during at least a majority of the instructional process; (b) the influence of a college or university; (c) the use of educational media (e.g., video) to unite the teacher and learner in course content; and (d) the provision of two-way communication between teacher, tutor, or educational agency and learner (Clark, 1991). The first of these elements refers to ". . . any formal approach to learning in which a majority of the instruction occurs while the educator and learner are at a distance from one another" (Clark, 1991, p. 8).

As for the second and third element, distance education is viewed as being carried out by a university that develops educational media to unite teacher and learner. Universities can offer classes that accommodate schedules (e.g., night classes and weekend schedules), as well as offer classes in a nontraditional format (**video-taped courses**) (Hendren, 1992). The fourth element pertains to the provision of two-way communication. The increasing utilization of electronic media for distance educational programs, referred to as telecommunications-based instruction, includes instruction wherein the primary modes of delivery are many, such as open broadcast television and **video.** This instruction is usually supported by textbooks, study guides, and other study aids, and may involve personal interaction with faculty, or other educational personnel by computer, telephone, mail, or face-to-face meetings (*Distance Learning and Outreach Technology*, 1993).

Benefits

When viewed as an alternative to classroom instruction, distance education offers many significant advantages. The following are but a few reasons for its strong appeal.

- Many adults find distance education more viable because their work schedules or leisure time activities often conflict with enrollment in "on-campus" classes.
- Distance learning eliminates unnecessary travel (Clark, 1991).
- The student can initiate learning at times and locations convenient to them (Eldridge, 1992; Hutton, 1983; Laaser & Stanford, 1983).
- Many adults, especially in rural areas, are financially (and psychologically) tied to an area, and have no desire to leave to study elsewhere (Eldridge, 1991).
- Adults enrolled in higher education are much more likely to study part-time than full-time.
- A major cost of full-time education is the cost of student time. Full-time education is the loss of wage or salary income (Laaser & Stanford, 1983).

These and other reasons are verified by our recent survey of 191 transition personnel who attended the 1993 annual Alabama Statewide Conference on Transition. One of the items was an open-ended question: ***"I (and others in my work area) would welcome the opportunity for "distance learning" in transition because . . ."*** The following sample of verbatim answers is reflective of over ninety other like statements provided by the respondents.

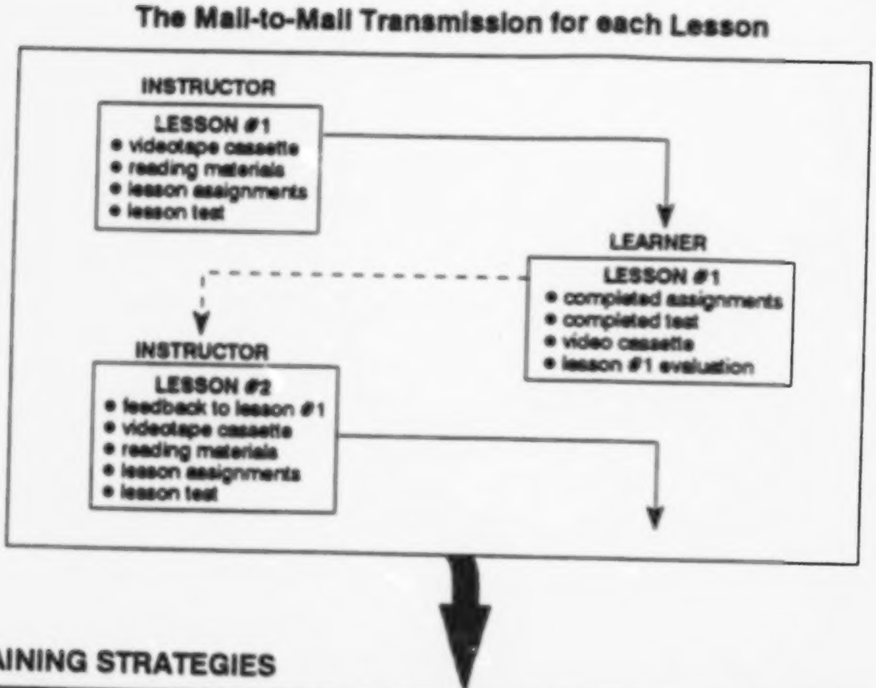
- ***"Our opportunities are often limited by time and distance in rural systems like ours."*** **(Escambia County)**
- ***"This type module would assist those of us in rural areas by providing opportunities that are presently unavailable to us. I see our students being able to really benefit."*** **(Macon County)**
- ***"I and others in my work area would welcome . . . distance learning in transition because it is difficult to access programs from this rural setting."*** **(St. Clair County)**
- ***"It would eliminate the need for travel . . ."*** **(Jefferson County)**
- ***". . . traveling time takes away from learning time. The mental and physical exhaustion caused by traveling takes away the alertness for study."*** **(Franklin County)**
- ***"It would afford us education in a significant area that we won't receive otherwise."*****(Barbour County)**
- ***"We do not have colleges close by that offer vocational courses."*** **(Cherokee County)**
- ***"We cannot afford to pay for teachers to be away from their classrooms plus registration and overnight accommodations to attend workshops."*** **(Tallapoosa County)**

Auburn's Distance Education Model

Auburn's Distance Education Model has several unique features that makes it an attractive training model alternative. Figure 1 presents the model's blueprint for this learning medium for transition personnel. The first training feature is "mail-to-mail" learning in which videotape cassettes are used to accompany other training materials. The second feature pertains to two face-to-face on-campus sessions, whereas the final training strategy is voice-to-voice learning between the instructor(s) and learner(s). Each of these features is briefly discussed below.

- **Mail-to-Mail.** There is a strong rationale for the usage of **videotape cassettes** in higher education. As well, according to Laaser and Stanford (1983), *"Video is widely believed to have a great impact on teaching at a distance"* (p. 247).

  There are many inviting features of **"videotaped cassettes"** as a learning medium (Hutton, 1983). First, at the lowest level of video production, the program can consist simply of a videotaped lecture of a normal classroom presentation. Second, the students can view the videotape at any time of the day or night and at any place, as well as stop, start, and repeat as many times as they wish. Third, videotapes can be mailed as easily as letters and booklets.


The Mail-to-Mail Transmission for each Lesson
INSTRUCTOR
LESSON #1
• videotape cassette
• reading materials
• lesson assignments
• lesson test
LEARNER
LESSON #1
• completed assignments
• completed test
• video cassette
• lesson #1 evaluation
INSTRUCTOR
LESSON #2
• feedback to lesson #1
• videotape cassette
• reading materials
• lesson assignments
• lesson test

TRAINING STRATEGIES

COURSE SEQUENCE	MAIL-TO-MAIL	FACE-TO-FACE	VOICE-TO-VOICE
BEGINNING – INSERVICE		X	
Lesson #1	X		
Lesson #2	X		
Lesson #3	X		
Lesson #4	X		
TECHNICAL ASSISTANCE			X
Lesson #5	X		
Lesson #6	X		
Lesson #7	X		
Lesson #8	X		
TECHNICAL ASSISTANCE			X
Lesson #9	X		
Lesson #10	X		
Lesson #11	X		
Lesson #12	X		
ENDING – INSERVICE		X	

Auburn's Innovative Model for Distance Learning
Figure 1

- **Face-to-Face Learning**. Auburn's distance education model will include two occasions in which the learners meet in person with the instructor(s) for face-to-face training. As reflected in Figure 1, this training component will occur at the beginning and end of the course. Furthermore, this more traditional approach to in-service training will occur on the weekends, beginning on a Friday evening and continuing through Sunday noon. This training component will allow for a number of learning opportunities that may not result through the distance transmission of materials (video and written).

- **Voice-to-Voice Learning**. As reflected in Figure 1, the phone interaction will occur two times during each educational module. The two primary purposes of this training component will be (a) to offer the learner supervision with respect to the assigned field project, and (b) to serve as a resource and technical assistant to them with respect to transition issues, problems, and concerns.

Auburn's Mechanism for Distance Education Outlet

Auburn University has an Office of Distance Learning and Outreach Technology, the primary mission of which is to facilitate the creation and implementation of effective high-quality distance education programs. It is through this mechanism that our innovative training model will be developed and the materials transmitted. The office carries out a number of programmatic functions, including: (a) design and development with faculty of new distance learning programs; (b) coordination of necessary development, production, transmission, promotion and academic support services; (c) consultation to existing activities and cooperation on the development of grant projects; and (d) utilization of distance education methods (*Distance Learning and Outreach Technology*, 1993). It employs a number of electronic delivery systems that take the university directly to the students--at their homes and workplaces.

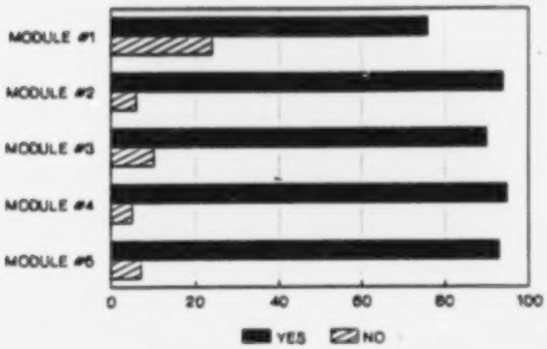
An Alabama Survey of Support

A Distance Education survey was mailed to approximately 350 participants who attended Alabama's 1993 Statewide Conference on Transition. Of these, the 191 (55%) that were returned included (a) special education coordinators (31%), (b) special education teachers (25%), (c) rehabilitation personnel (15%), and (d) other (29%) (e.g., school transition counselor, special population coordinator, job coach).

One hundred eight-three (96%) of the 191 respondents indicated that they felt that there was a need in their surrounding area for transition learning opportunities through distance education. The extent to which they indicated a need was: *slightly needed* (3%), *moderately needed* (12%), *needed* (34%), *muchly needed* (21%), and *greatly need* (27%).

A crosstab was performed between the type of service provider and the extent to which distance education was needed in their surrounding area. Special education teachers (64%) and vocational education teachers (60%) expressed the greatest need (*much needed* or *greatly needed*).

Survey respondents also were introduced to five content areas on transition and asked to indicate (a) the extent to which they considered each to be important, and (b) if they would be interested in receiving training in these areas via distance education (see Figure 2).



Module 1 = Foundations of Transition
Module 2 = Functional Assess/Curricula
Module 3 = Vocational/Community Preparation
Module 4 = Student and Parent Involvement
Module 5 = Interagency Participation

Respondents Interest in Receiving Distance Education

Figure 2

Summary

The Distance Education approach has particular utility for those who reside in a rural geographic locale. Consider a state such as Alabama in which only four cities have a population greater than 150,000, and 64% of the state's 1,325 schools are located in rural counties. The significance of offering such training opportunities for those in rural areas was frequently noted by those we surveyed: For example, one person said, ***"Our opportunities are often limited by time and distance in rural systems like ours. . ."*** Another noted, ***"This type module would assist those of us in rural areas by providing opportunities that are presently unavailable to us. I see our students able to really benefit."***

References

Browning, P. (Ed.). (1994). *Transition III in Alabama: A profile of commitment*. Auburn, AL: Department of Rehabilitation and Special Education, Auburn University. Proceedings of the 3rd annual statewide conference on transition.

Browning, P. (Ed.). (1993). *Transition II in Alabama: A profile of commitment*. Auburn, AL: Department of Rehabilitation and Special Education, Auburn University. Proceedings of the 2nd annual statewide conference on transition.

Browning, P. (Ed.). (1992). *Transition in Alabama: A profile of commitment*. Auburn, AL: Department of Rehabilitation and Special Education, Auburn University. Proceedings of the 1st annual statewide conference on transition.

Browning, P., & Dunn, C. (1993). Teacher preparation with an emphasis at the secondary level. *Alabama Council for Exceptional Children Journal*. *11*, 3-12.

Browning, P., & Dunn, C. (1993). *Using distance education to improve the quality of transition providers*. A Federal grant awarded from the Office of Special Education and Rehabilitative Services, U.S. Department of Education, Washington, DC.

Clark, T. (1991). *Distance education: The foundations of effective practice*. San Francisco. Jossey-Bass Publishers.

Distant learning and outreach technology (1993). A manual regarding the purpose, organizational structure, and policies and procedures of Auburn's distant education Extension Division, Auburn University.

Eldridge, G. (1992). Long Distance Learning. In R. N. Pacinelli & E. W. Stude (Eds.) *Achieving Excellence in Rehabilitation Education: The Stairway to Quality Rehabilitation Services* (pp. 93-96). Washington, DC: Proceedings of the 1992 Conference sponsored by The National Council on Rehabilitation Education (NCRE) and The Rehabilitation Services Administration (RSA) in cooperation with The Council of State Administrators of Vocational Rehabilitation (CSAVR).

Garrison, D. (1989). *Understanding Distance Education: A Framework for the future*. Boston: Routledge & Kegan Paul.

Hendren, G. (1992). Region IV. In R. Pacinelli & E. Stude (Eds.) *Achieving excellence in rehabilitation education: The stairway to quality rehabilitation services* (p. 71), Washington, DC: Proceedings of the 1992 Conference sponsored by The National Council on Rehabilitation Education (NCRE) and The Rehabilitation Services Administration (RSA) in cooperation with The Council of State Administrators of Vocational Rehabilitation (CSAVR).

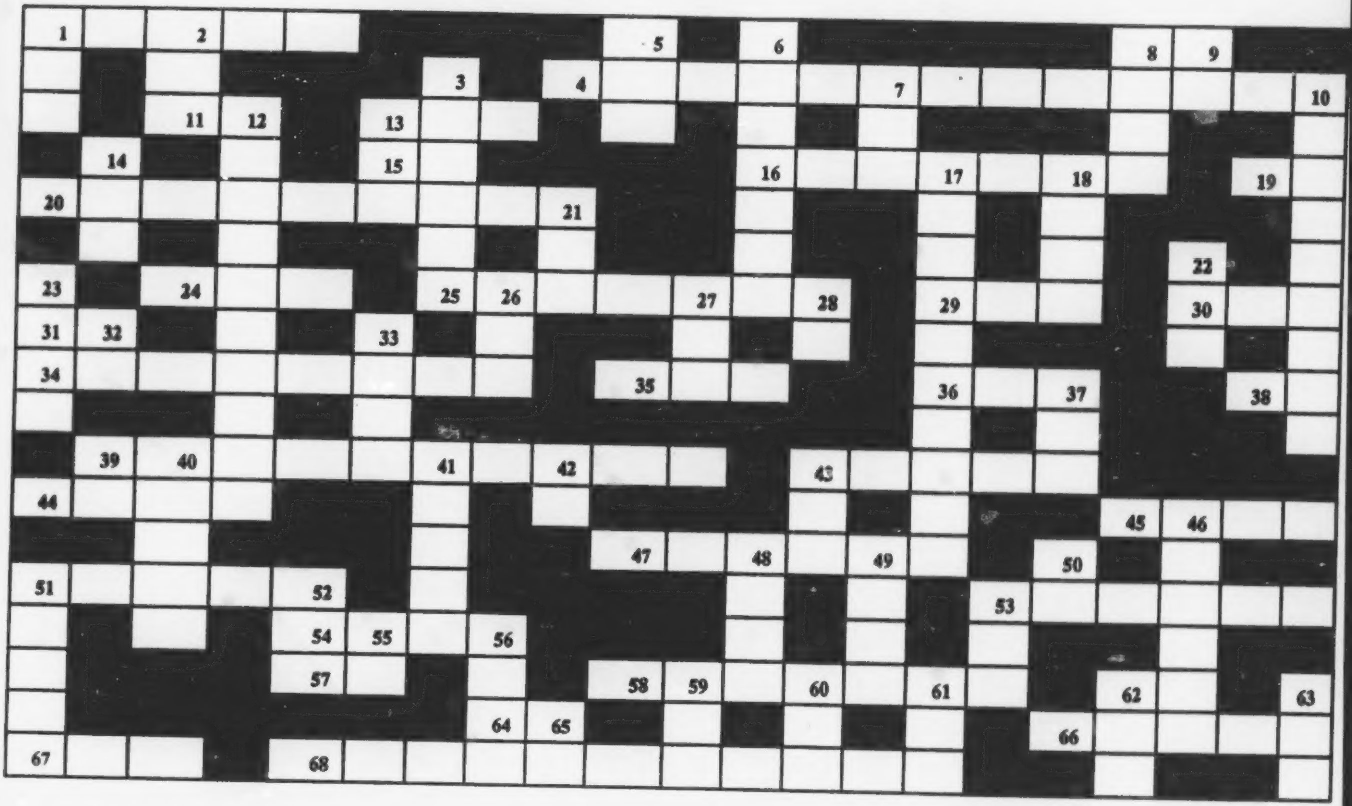
Holmberg, B. (1989). *Theory and practice of distance education*. Boston: Routledge & Kegan Paul,

Hutton, D. (1984). Video technology in higher education: State of the art? In O. Zuber-Skerritt (Ed.). *Video in higher education* (11-23). New York: Nichols Publishing Company.

Laaser, W., & Stamford, J. (1984). The use of video in distance education as applied to economics. In O. Zuber-Skerritt (Ed.). *Video in higher education* (pp. 247-258). New York: Nichols Publishing Company.

Have fun!

@ Phil, Transition IV



ACROSS

1. small, old log house
4. preferable state of being (3 words)
8. expression of relief
11. Goodrich
13. blue
15. approval, South of the Boarder
16. "________ over Madison County" - - Will's def.
19. Alabama's acronym for behavior disorders
20. therapist
25. exceptional
24. and so on
29. more than one choice (abbrev.)
30. Alabama state agency (acronym)
31. Spielberg's famous movie
34. the act of support
35. make a choice
36. written "plan" of action for youth
38. first word in the Gettysburg address
39. ← from school to community →
43. ‡ ↔ ‡ connect ‡ ↔ ‡
44. Christmas in France
45. stare
47. transition stakeholder
51. teach/assist/guide
53. to equip
54. written "plan" of action for adults
57. moi (Fr.)
58. primary consumer
62. MD, Ph.D.
64. aller (Fr. vb.)
66. professional training event (abbrev.)
67. sorrow
68 result of choice-making, self-determination

DOWN

1. organization for sp. ed. teachers
2. a liquor -- "&"
3. abilities
5. soft
6. ♪ ♪ ♪ "Here we are" ♪ ♪ ♪ - by
7. Lakeshore Rehabilitation Center
8. used to express unhappiness
9. Greeting
10. inclusive (oppos.)
12. type of assessment
13. direction
14. work
17. impairment
18. graduate/drop out
21. acronym for two related professions
22. landmark legislation
23. 2 or more animals harnessed to same vehicle
26. £ £ £ £ ₠ ₠ ₠ ₠ ₣ ₣ ₣ ₣
27. written "plan" of action for children
28. dyslexia
32. six points
33. happy hour
37. animal friend
39. _____ be or not _____ be . . .
40. helping profession (abbrev.)
41. ↔ between ↔
42. that is
43. _____ alai
46. color (see 51 down)
48. detailed list
49. Brolin's curriculum
50. nurse
51. Auburn (see 46 down)
52. lui (Fr.)
53. to consume
55. sound is same as French word for "yes"
56. French trademark, stick/pole
59. functioning level (IQ 35-55)
60. Alabama state agency (acronym)
61. basketball tournament
62. dictionary of jobs
63. organization for rehab. counselors
65. expression of pain

BEST COPY AVAILABLE

TRANSITION IV
CONFERENCE PARTICIPANTS

ALABAMA
TOWNS and CITIES REPRESENTED

Abbeville
Adger
Alabaster
Alexander City
Andalusia
Anniston
Arab
Asheville
Athens
Auburn
Bessemer
Birmingham
Boaz
Chatom
Childersburg
Clayton
Columbiana
Cullman
Dadeville
Decatur
Dolomite
Dothan
Dozier
Duncanville
Elba
Enterprise
Eufaula
Fairfield
Fairhope
Fayette
Florence
Fultondale
Gadsden
Gardendale
Geraldine
Goshen
Grovehill
Guntersville
Hartselle
Hayneville
Headland
Homewood
Huntsville
Jackson
Jacksonville
Jasper
Lacey's Spring
LaFayette
Millport
Mobile
Montgomery
Montevallo
Mt. Olive
Mt. Meigs
Muscle Shoals
Northport
Opelika
Opp
Ozark
Pell City
Phenix City
Piedmont
Prattville
Prichard
Rainsville
Robertsdale
Scottsboro
Seale
Selma
Sheffield
Springville
Sumiton
Sylacauga
Talladega
Tallassee
Tarrant
Thomasville
Troy
Trussville
Tuscaloosa
Tuskegee
Valley
Vernon
Vinemont
Wadley
Wedowee
Wetumpka

OTHER STATES

Florida
Georgia
Kansas
Kentucky
Mississippi
Oregon
South Carolina
Tennessee

TRANSITION IV CONFERENCE PARTICIPANTS

PRECONFERENCE AND/OR CONFERENCE PARTICIPANTS

Abney, Charles, Counselor
Rehabilitation Services
1105 Woodstock Ave.
Anniston, AL 36201

Adams, Wyndal E., Supervisor
Adult Rehabilitation Services
P.O. Drawer 698
Dothan, AL 36303

Adams-Carter, Doris, Teacher
1011 Prospect Dr.
Decatur, AL 35601

Ainsworth, Arleen, Executive
Director
P.O. Box 853
Scottsboro, AL 35768

Akin, Craig, Counselor
Rehabilitation Services
518 E. Parklane Shopping Ctr.
Troy, AL 36081

Alford, Lisa B., Counselor
Rehabilitation Services
P.O. Drawer 030830
Tuscaloosa, AL 35403

Allen, Donna
Mobile Evaluator
P.O. Drawer 2247
Anniston, AL 36202

Allen, Nita, Teacher (MLH)
Special Education
443 Henderson Camp Rd.
Adger, AL 35006

Amberson, Emily
Transition Coordinator
110 Johnston St.

Anderson, Eric R., Evaluator
510 W. Thomason Circle
Opelika, AL 36801

Andrews, Donna, Educational
Consultant
1970 Twin Towers East
Atlanta, GA 30334

Anthony, Adores, Counselor
Rehabilitation Services
P.O. Box 19888
Homewood, AL 35219-0888

Anthony, Celia, Teacher (LD/EC)
2826 Columbiana Rd.
Birmingham, AL 35216

Atkins, Damon J., Counselor
Rehabilitation Services
P.O. Box 19888
Homewood, AL 35219-0888

Atwell, Angie, Transition Teacher
Northview High School Hwy 431N
Dothan, AL 36303

Austin, Pat
Transition Coordinator
906 South Scott St.
Scottsboro, AL 35768

Babcock, Robert A.
Assistant Professor
Department of Psychology
Auburn University, AL 36849

Babcock, Susan
Senior Program Specialist
2540 Executive Center Cr. W
Tallahassee, FL 32399

Bailey, Wade, Regulation Admin.
Captial Plaza Tower, 9th Floor
500 Mero St.
Frankfort, KY 40601

Bain, Karen, Teacher
Cooswell Avenue
Pell City, AL 35125

Baker, JoAnn M., Counselor
Rehabilitation Services
1100 George Wallace Dr.
Gadsden, AL 35999

Baker, Rhonda, Teacher (OI/OHI)
Special Education
233 Payne Road
Gardendale, AL 35071

Baker, Wendy, Teacher
2104 Glenwood Dr.
Opelika, AL 36801

Baker, Werner, Supervisor
Rehabilitation Services
P.O. Box 1686
Decatur, AL 35602-1686

Ballard, Pamela J., Counselor
Rehabilitation Services
520 W. Thomason Circle
Opelika, AL 36801

Bandstra, Vicki, Teacher
Special Education
P.O. Box 464
Elba, AL 36323

Banerjee, Manjo, Specialist
Rehabilitation Services
P.O. Box 59127
Birmingham, AL 35259

BEST COPY AVAILABLE

Barclay, Judy M., Parent
Special Education Advocate
4951 Spring Rock Rd.
Birmingham, AL 35223

Barnes, Penny, Teacher
502 Maloy St.
Opp, AL 36467

Barr, Jane, LD Teacher
Rt. 3 Box 134A
Opp, AL 36467

Baylor, Alberta, Coordinator
Special Education
P.O. Box 1230
Bessemer, AL 35021

Beall, Sandra, Teacher
Special Education
Rt. 1 Box 242
Lacey's Spring, AL 35754

Beard, Merritt, Counselor
P O Box 4317
Meridian, MS 39304

Bearden, Jerry R.
Transition Director
P.O. Box 81
Geraldine, AL 35974

Bega, Dennis, Acting Regional Commissioner
Rehab Services Administration
Office of Special Education
& Rehabilitative Services
U.S. Department of Education
P O Box 1691
Atlanta, GA 30323

Bell, Robert
Counselor-CVCC
2602 College Dr.
Phenix City, AL 36869

Bellah, Robby, Teacher
Special Education
1411 Montevallo Hwy.
Alabaster, AL 35007

Berry, Johnny, Teacher
311 Speegle St., SW
Hartselle, AL 35640

Berry, Judy, Supervisor
Special Education
12380 US Highway 431 South
Guntersville, AL 35976

Berry, Karen, Coordinator
Special Education
109 East Church St.
Troy, AL 36081

Berry, Randy, Counselor
Rehabilitation Services
1100 George Wallace Dr.
Gadsden, AL 35999

Bevel, Marian, Coordinator
Special Education
2019 Princeton Blvd.
Huntsville, AL 35801

Bice, Brandt, Specialist
Rehabilitation
1616-6th Ave. South
Birmingham, AL 35233

Black, Debbie, Teacher (MR)
Special Education
2214 Jennifer Ave.
Muscle Shoals, AL 35661

Bliss, Randy
Employment Specialist
P.O. Box 70274
Mobile, AL 36670

Blumberg-Schlueter, Barbara
Counselor, Rehab. Services
795 Ross Clark Circle
Dothan, AL 36303

Bodet, Lynn, Director
Employment Services
P.O. Box 70274
Mobile, AL 36670

Bogie, Cheryl, Counselor
P.O. Box 66
Mt. Meigs, AL 36057

Bohnenstiehl, Ken, Coordinator
Special Needs Population
33 W. Elm St.
Prichard, AL 36610

Booth, Matthew, Specialist
Job Developer
109 E. Church St.
Troy, AL 36081

Boozer, Dianne, Counselor
Skills Coach
812 Morningside Dr., N.E.
Jacksonville, AL 36265

Boswell, Cary, Ed.D., Coordinator
Transition Program
Rehabilitation Services
2129 E. South Blvd.
Montgomery, AL 36111

Bradley, Gwen, Counselor
Rehabilitation Services
922 5th Ave. E.
Tuscaloosa, AL 35401

Brandt, Rhett, Career Counselor
P.O. Box 870304
Tuscaloosa, AL 35487

Brechin, Connie, Supervisor
Rehabilitation Services
1100 George Wallace Dr.
Gadsden, AL 35999

Brewer, Jim, Counselor
Rehabilitation Services
2419 Gordon Smith Dr.
Mobile, AL 36617-2395

Bright, B. Glenn
Vocational Rehab Classroom
1100 George Wallace Dr.
Gadsden, AL 35999

Britton, Warner H.
Transition Coordinator
1017 Alan Ave.
Auburn, AL 36830

Brown, Clarence, Coordinator
Undergraduate Rehabilitation Program
Rehabilitation and Special Education
1234 Haley Center
Auburn University, Al 36849-5112

Browning, Mary, Counselor
Rehabilitation Services
520 W. Thomason Circle
Opelika, AL 36801

**Phil Browning, Head
Rehabilitation and Special
Education
1234 Haley Center
Auburn University, Al 36849**

**Bryson, Louis, Investigator
Office of Civil Rights
101 Marietta Tower Suite #2704
Atlanta, GA 30301**

**Burge, Christine E., Education
Specialist
P.O. Box 302101
Montgomery, AL 36130-2101**

**Burgess, Lynn, Teacher
Special Education
1108 Frisco St.
Homewood, AL 35209**

**Burkhart, Barry, Professor
Department of Psychology
4082 Haley Center
Auburn University, AL 36849**

**Butler, Nan, Coordinator
Work Experience
1616 6th Ave. South
Birmingham, AL 35233**

**Butler, Steve, Supervisor
Rehabilitation Services
P.O. Box 2388
Muscle Shoals, AL 35662-2388**

**Carden, Karen, Coordinator
Staff Development
Rehabilitation Services
2129 East South Blvd.
Montgomery, AL 36111**

**Carroll, Barbara, Teacher
1300 37th Street, East
Tuscaloosa, AL 35405**

**Carroll, Bob, Director
Client Services
P O Box 1698
Jackson, MS 39215-1698**

**Carroll, Mona F., Specialist
Special Education
538 Larkin Lane
Montgomery, AL 36109**

**Carson, Brenda
Employment Specialist
2430 Eleventh Ave. N.
Birmingham, AL 35234**

**Catalogna, Dana, Counselor
Rehabilitation Services
P.O. Box 59127
Birmingham, AL 35259-9127**

**Chaplin, Cathy, Teacher (EMR)
Special Education
South Girard School
521 Fontaine Rd.
Phenix City, AL 36869**

**Chapman, Laney, Parent
Chapel Hill
Dothan, AL 36303**

**Cherry, Tina L., Teacher
Special Education
Rt. 3 6217 Egypt Rd. Lot 3
Boaz, AL 35957**

**Chestnut, Jessie, Coordinator
Transition & Employment
91 Black Creek Rd.
Tarrant, AL 35217**

**Chitwood Ella G., Psychometrist
1720 Springhill Ave., St.422
Mobile, AL 36604**

**Christian, Nan T., Director
20 W 14th St.
Anniston, AL 36201**

**Christian, Rachel, Teacher
3611 Rice Mine Rd., NE, Lot 323
Tuscaloosa, AL 35406**

**Clemmons, Charles E.
Transition Teacher
17600 US Hwy 31 North
Cullman, AL 35055**

**Cleveland, Rebecca, Counselor
Rehabilitation Services
236 Goodwin Crest Dr.
Homewood, AL 35219**

**Cole, Jane, Teacher
Special Education and Transition
Rt. 2 Box 272
Millport, AL 35576**

**Comegys, JoNell
Transition Coordinator
101 Glenwood Lane
Birmingham, AL 35242**

**Cook, Patrice, Teacher
Work Experience
Gardendale High School
Gardendale, AL 35071**

**Cooper, Marjory, Teacher
#3 Church St.
Birmingham, AL 35216**

**Cosgrove, Sheree, Teacher (LD)
Special Education
405 South Dean Rd.
Auburn, AL 36830**

**Creel, Janice, Counselor
Rehabilitation Services
1100 George Wallace Dr.
Gadsden, AL 35905**

**Crenshaw, Lori
Vocational Evaluator
2419 Gordon Smith Dr.
Mobile, AL 36609**

**Crittenden, Princess D., Teacher
3813 Willis Rd. #18
Columbus, GA 31904**

**Cumberlander, Ulus, Teacher
Special Education
501 Hwy. 29
Valley, AL 36854**

**Curtis, Brenda, Teacher
Special Education
214 First Ave SE
LaFayette, AL 36862**

**Cutrona, Pat
Employment Specialist
P.O. Box 70274
Mobile, AL 36670**

**Dagostin, Jean, Counselor
ADA Student Coordinator
Rt. 5 Box 52
Dothan, AL 36303**

**Davidson, Marie, Teacher
400 Yeardley St.
Troy, AL 36081**

BEST COPY AVAILABLE

Davis, Cynthia, Teacher
Special Education
Lafayette Pkwy.
Opelika, AL 36801

Davis, Donna, Teacher II
11210 Old Dominion Dr.
Duncanville, AL 35456

Deabler, Nancy
Clarke County
Grove Hill, AL 36451

Dear, Keith, Counselor
Rehabilitation Services
1105 Woodstock Ave.
Anniston, AL 36201

Dees, Bobby, State Coordinator
50 N. Ripley St.
Montgomery, AL 36130

DeRamus, Alice
School Psychometrist
319 Upper Kingston Rd.
Prattville, AL 36067

DeVaughn, Jeanette
Service Coordinator
P.O. Box 1730
Tuscaloosa, AL 35403

DeVaughan, Richard, Teacher
Special Education
Enterprise High School
Enterprise, AL 36330

Dewberry, Patricia A., Teacher
574 Hollow Wood Rd.
Montgomery, AL 36109

Dickert, Vickiem, Teacher (TMR)
Special Education
Northview HS Hwy 431N
Dothan, AL 36303

Dixon, Jerry, Coordinator
Special Populations
P.O. Box 529
Robertsdale, AL 36567

Donald, Jim, Supervisor
Rehabilitation Services
P.O. Box 19888
Homewood, AL 35219

Dudley, Sally, Teacher
Special Education
1901 South Lakeshore Dr.
Homewood, AL 35209

Dunagan, Lumonie
Clarke County
Grove Hill, AL 36451

Caroline Dunn, Asst. Professor
Rehab. & Special Education
1234 Haley Center
Auburn University, Al 36849-5112

Dunn, Gloria, Counselor
518 E Parklane Shopping Ctr.
Troy, AL 36081

Dunn, Nadine H., Coordinator
TBI Care
1100 George Wallace Dr.
Gadsden, AL 35999-6501

Easterling, Mary R., Teacher
(OI/OHI)
Special Education
4553 Old Caldwell Mill Rd.
Birmingham, AL 35242

Edwards, Beth
Spec Ed Transition Services
3428 Country Brook Lane
Birmingham, AL 35243

Echols, Jackie
Program Specialists
9 Brown School Rd.
Grantville, GA 30220

Edgil, Claire
Service Coordinator
Futures Unlimited
P.O. Box 1730
Tuscaloosa, AL 35401

Elder, Joan, LD Teacher
3285 Farrington Wood Rd.
Birmingham, AL 35243

Eliott, Elisa, Teacher (EC)
Special Education
1918 13th St. Apt. 5-A
Columbus, GA 31906

Ellis, Mickie J., Teacher
Special Education Resource
6617 Wellborne Dr., S.
Mobile, AL 36695

Ellis, Richard
Assistant Professor
Vocational & Adult Education
Auburn University, AL 36849

Elston, Delesilyn, Teacher
P O Box 698
Talladega, AL 35160

Engel, Sherry, Coordinator
Transition Services
P.O. Box 597
Decatur, AL 35602

Espy, Martha, Coordinator
Special Education
P.O. Box 653
Abbeville, AL 36310

Evans, Earnestine, Teacher
Transition Coordiantor/Spec Ed
405 South Dean Rd.
Auburn, AL 36830

Falkner, Dorothy, Counselor
Referral Coordinator
17600 U.S. Hwy 31
Cullman, AL 35055

Fearon, Rebecca, Director
Program for Exceptional Youth
P.O. Box 1500
Anniston, AL 36202

Felton, Linda, Teacher
Special Education
Lafayette Pkwy.

Fielden, Peter, Coordinator
Day Treatment
150 Glenwood Lane
Birmingham, AL 35242

Fields, Rebecca
Transition Supervisor
2419 Gordon Smith Dr.
Mobile, AL 36617

Flemming, Richard K.
Department of Psychology
Auburn University, AL 36849

Flowers, Rhonda, JTPA Specialist
Rt. 6 Box 285
Troy, AL 36081

Floyd, Cynthia, Counselor-CVCC
2602 College Dr.
Phenix City, AL 36869

Fox, John, Teacher
P.O. Box 66
Mt. Meigs, AL 36057

Fox, Nathaniel, Assistant Professor
Troy State University McArthur
Troy, AL 36082

Friend, Pat, Assistant Director
Box 870304
Tuscaloosa, AL 35476

Frazier, Deloris, Supervisor
Special Education
25-12th Street South
Pell City, AL 35125

Gardner, Donna, Teacher
#3 Church St.
Birmingham, AL 35216

Garrett, Brent, Director
University of Kentucky

Garris, Stann, Program Director
3489 Independent Dr. Suite 101
Birmingham, AL 35223

German, Willer, Teacher
Special Education
4736 Rainbow Curve
Montgomery, AL 36116

Gibson, Becky, Specialist
Job Development & Placement
P.O. Box 338
Dothan, AL 36302

Gibson, Debbie, Counselor
Rehabilitation Services
P.O. Box 1686
Decatur, AL 35602

Gilbert, Diane
Interim Coordinator
P O Box 408-D
LaFayette, AL 36862

Gillespie, Ellen B., Director
Regional V
91 Black Creek Rd.
Tarrant, AL 35217

Glanton, David, Teacher
Sporman, Street
Headland, AL 36345

Goggins, Becky, Teacher
23 Monte Tierra Tr.
Montevallo, AL 35115

Goodsen, Philip
Trainer Specialist
P.O. Box 853
Scottsboro, AL 35768

Granger, Patricia, Transition
Teacher
Northview HS Hwy 431N
Dothan, AL 36303

Graves, Jeanette, Coordinator
Special Population
3435 Richmond Court
Montgomery, AL 36111

Greene, Anthony C., Supervisor
P.O. Box 399
Fairfield, AL 35064

Gregg, Tammy, Counselor
Rehabilitation Services
P.O. Box 1686
Decatur, AL

Grider, Dianne, IEP Coordinator
Courthouse Suite 20
Scottsboro, AL 35768

Griffin, Gary, Teacher Assistant
150 Glenwood Lane
Birmingham, AL 35242

Griggs, Deborah, CABS Lab
Teacher
2316 7th Ave., North
Birmingham, AL 35204

Hall, Annette, Work Specialist
25-12th Street, South
Pell City, AL 35125

Hall, Phyllis Sikes, Coordinator
Federal Programs
P.O. Box 290
Wedowee, AL 36278

Hall, Rod, Transition Specialist
P.O. Box 488
Rainesville, AL 35986

Halpern, Andrew, Director
Secondary Transition Program
University of Oregon
Eugene, OR 97403

Hames, Linda, Director
Specific Learning Disabilities Project
P.O. Box 59127
Homewood, AL 35259

Hand, Cheryl D. Morgan, Teacher
Special Education
2025 Rockwood Lane
Fultondale, AL 35068

Hardwick, Joanna, Teacher (EMH)
Special Education
403 Wilson Dam Avenue
Sheffield, AL 35660

Harkins, Julie, Teacher
421 4th Ave.
Childersburg, AL 35044

Harris, Marzett C., Rehab. Specialist
1616 6th Ave., South
Birmingham, AL 35233

Harris, Peggy, Program Associate
P.O. Box 870304
Tuscaloosa, AL 35487

Harrison, Regina, MR Teacher
1206 Benson Dr.
Opelika, AL 36801

Harrison, Sandra, Vocational
Instructor
P.O. Box 338
Dothan, AL 36302

Harry, Deborah, Teacher (LD)
Special Education
P O Box 327
Valley, AL 36854

Hart, Rosemary, Coordinator
Special Education
6925 Twin Beech Rd.
Fairhope, AL 36532

BEST COPY AVAILABLE

Hartsell, Kim
Speech/Language Path.
5277 Ash St
Forest Park, GA 30050

Hartsfield, Teresa, Teacher
Special Education
800 4th St., SE
Childersburg, AL 35044

Harvey, Debra, Transition Teacher
823 Hunter Place
Anniston, AL 36201

Haynes, Kelly, Director
Auburn Program for Students with Disabilities
Rehab. & Special Education
1234 Haley Center
Auburn University, AL 36849

Head, Mark, LD Teacher
Eagle Circle
Gadsden, AL 36035

Herren, Jeanette, Coordinator
Special Education
P.O. Box 599
Fayette, AL 35555

Higgins, Susan, Counselor
Rehabilitation Services
P.O. Box 698
Dothan, AL 36302-0698

Hilderbrand, Ann, Consulting Teacher
1516 Carlisle Dr., West
Mobile, AL 36618

Hines, Wayne, Employment Spec II
P.O. Box 553
Jackson, AL 36545

Holloway, Simon J., Counselor
Rehabilitation Services
2419 Gordon Smith Dr.
Mobile, AL 36617

Hopkins, Eloise
Clarke County
Grove Hill, AL 36451

Holder, Cheryl, Director
Special Education
906 South Scott St.
Scottsboro, AL 35768

Holladay, Harold, Teacher
210 Broadway St.
Montgomery, AL 36110

Holmes, Teresa
EDC
P.O. Box 698
Dothan, AL 36302

Howard, Cal Donnia, Teacher (EMR/LD)
Special Education
103 Tiger Dr.
Elba, AL 36323

Howard, Phillip, Specialists
Transition Work
P.O. Box 1359
Chantom, AL 36518

Hughes, Ginger, Teacher
Special Education
405 South Dean Rd.
Auburn, AL 36830

Humphries, Mickey, State Coordinator
5233 Gordon Persons Bldg.
Montgomery, AL 36130

Hyde, Mary G., Teacher (MR)
Special Education
1805 Hillabee Rd.
Alexander City, AL 35010

Jackson, Cynthia, Instructor
901 S. 13th St.
Birmingham, AL 35294

Jackson, Kevin, Work Specialist
109 E. Church St.
Troy, AL 36081

Jackson, Mary, Parent
2911 St. Peter St.
Dothan, AL 30303

Johns, Karen, Teacher
P.O. Box 66
Mt. Meigs, AL 36057

Johnson, Cynthia, Teacher
6105 Belgrade Dr .
Huntsville, AL 35810

Johnson, Edsel, Counselor
P.O. Box 698
Dothan, AL 36302

Johnson, Jane, Counselor
P.O. Box 19888
Homewood, AL 35219

Johnson, Karlyn, Counselor
Special Populations
410 13th St., S
Birmingham, AL 35233

Johnson, Linda, Academic Advisor
2900 Waverly Pkwy.
Opelika, AL 36801

Johnson, Olivia, Teacher (TMR)
Special Education
100 High School Dr.
Bessemer, AL 35020

Johnson, William, Counselor I
Rehabilitation Services
P.O. Drawer 698
Dothan, AL 36302

Jones, Carol, Teacher I
University Box 3024
Tuscaloosa, AL 35486

Jones, Chrystal, Counselor
Calhoun College
Box 2216
Decatur, AL 35609

Jones, Gayle, Program Specialist
P.O. Box 887
Talladega, AL 35160

Jones, John, Education Specialist
4324 Yorkshire Dr
Montgomery, AL 36108

Jordan, Rex E., Trans. Coordinator
100 High School Dr.
Bessemer, AL 35020

Killough, John, Counselor
P.O. Box 66
Mt. Meigs, AL 36057

King, Beth, Teacher (LD)
Special Education
South Girard School
521 Fontaine Rd.
Phenix City, AL 36869

Knox, Cindi, Teacher
Special Education
Rt. 1, Box 696
Dadeville, AL 36853

Koterba, Ashlie, Specialist
Family Service
P.O. Box 8646
Dothan, AL 36304

Krigbaun, Joyce, Counselor
Rehabilitation Services
P.O. Box 1686
Decatur, AL

Krueger, Paula, Counselor
Rehabilitation Services
2127 East South Blvd
Montgomery, AL 36199

Kuffel, Richard, Consultant
Client Services
1410 Boston Ave.
West Columbia, SC 29171

Lambert, Joseph R., Supervisor
Rehabilitation Services
520 West Homan Circle
Opelika, AL 36801

Lane, Linda, Academic Advisor
Fob James Drive
Valley, AL 36854

Laney, Beverly, Teacher (LD)
Special Education, BRHS
P.O. Box 1029
Alex City, AL 35010

Lavender, Beverly
Transition Coordinator
801 6th Ave., South
Birmingham, AL 35233

Laymon, Gerald J., Counselor
Rehabilitation Services
237 Bowling Green Dr.
Montgomery, AL 36109

Lee, Kathryn, Teacher
6 Brown Dr.
Ozark, AL 36360

Lewis, Merry, Teacher
#3 Church St.
Birmingham, AL 35216

Lindsey, Montney, Teacher (EMR)
Special Education
Eggle Circle
Goshen, AL 36035

Lingenfelter, Roger, Job Coach
1109 Woodstock Ave.
Anniston, AL 36201

Litton, Gay, Program Specialist
208 Clermont Dr.
Birmingham, AL 35209

Long, Jean, Service Coordinator
201 East Camphor
Foley, AL 36536

Love, Doyle, Supervisor
Rehabilitation Services
922 54th Ave., E
Tuscaloosa, AL 35401

Lowe, Linda J., Specialist
Transition Work/Job Coach
64 Overlook Drive
Seale, AL 36875

Lyons, David H., ADA
Coordinator
P.O. Drawer 1049
Selma, AL 36702

Lynch, Ira
Clarke County
Grove Hill, AL 36451

Madari, Rhonda, Work
Instructor
5766 Meadowview Lane
Mt. Olive, AL 35117

Maestri, Sharon, LD Teacher
108 Surry Ave.
Troy, AL 36081

Magness, Gloria, Teacher
Special Education
2604 Valley Brook Ct.
Huntsville, AL 35811

Manosky, Wanda, Counselor
Rehabilitation Services
P.O. Box 2388
Muscle Shoals, AL 35662-2388

Matlles, Elizabeth, Counselor
Rehabilitation Services
P.O. Box 19888
Birmingham, AL 35219

Meadows, Linda W.
Tallapoosa Co. Voc Coordinator
Route 4, Box 240A
Alexander City, AL 35010

Melton, Glennie P., Counselor
Rehabilitation Services
520 W. Thomason Circle
Opelika, AL 36801

Merchant, Janet, Teacher (LD)
Special Education
621 First St. SE
LaFayette, AL 36862

McClanahan, Michael
Rehabilitation Consultant
112 Reese Ave.
Auburn, AL 36830

McDowell, H. Gene, Counselor
Rehabilitation Services
407 Governors Dr., SW
Huntsville, AL 35804

McGahey, Janet L.
Rehabilitation Services
3400 McFarland Blvd.
Northport, AL 35476

McKerley, Brian
Program Specialist
400 Deaderick St. 11th Floor
Nashville, TN 37246-6000

McKown, Elizabeth, Director
Rehabilitation Services
1430 Confederate Ave.
Columbia, SC 29201

McLain, Amber D., Counselor
Rehabilitation Services
#4 Medical Office Park
Talladega, AL 35160

McLain, Susan, Teacher
421 4th Ave.
Childersburg, AL 35044

McLurin, Nancy Hall, Psychologist
301 Wart Hill Court
Montgomery, AL 36104

McPeters, Sharon, Teacher
Special Education
1411 Montevallo Hwy
Alabaster, AL 35007

McRae, Constance, Transition
Coordinator
2419 Gordon Smith Dr.
Mobile, AL 36617

Metlock, Christye, Teacher (MR)
Special Education
907 12th Ave., SW
Jasper, AL 35501

Metlock, Vincent, Teacher (MR)
Special Education
907 12th Ave., SW
Jasper, AL 35501

Miller, R. Kim, Counselor
Rehabilitation Services
807 Eighth Ave
Andalusia, AL 36420

Minor, Larry
Transition Coordinator
50 N. Ripley
Montgomery, AL 36130

Mitchell, Allison, Teacher
Vocational Remedial Skills
Rt. 1, Box 487
Clayton, AL 36016

Mobley, Pamela A., Ph.D.
Adult Vocational Rehabilitation
P.O. Box 19888
Homewood, AL 35219-0888

Moody, Rodney, Teacher
520 E. 6th St., Apt #8
Anniston, AL 36201

Morgan, Cheryl D.
2025 Rochewood
Fultondale, AL 35008

Morris, Claude
Transition Specialist
P.O. Box 2388

Morris, Linda T. Bearden
Special Needs
1306 Roosevelt Ave.
Selma, AL 36701

Morris, Lynn A., Teacher (TMR)
Special Education
809 Meadow Lane
Florence, AL 35630

Morris, William, Teacher
P O Box 519
Abbeville, AL 36310

Mullins, Mary, Coordinator
Job Access
3459 Independence Dr. Suite 101
Birmingham, AL 35223

Mulkey, S. Wayne, Ph.D.
Associate Professor
University of Tennessee
337 Claxton Addition
Knoxville, TN 37996-3400

Myrick, James, Coordinator
Employer Development
2127 E. South Blvd.
Montgomery, AL 36199

Named, Marsha, Counselor
Rehabilitation Services
#4 Medical Office Park
Talladega, AL 35160

Nance, Robert, M.Ed.
Lead Teacher
150 Glenwood Lane
Birmingham, AL 35242

Newman, Terry,, Supervisor
Asst. Special Education
6925 Twin Beech Rd.
Fairhope, AL 36532

Nix, Johnny, Teacher
Adult Education
812 Shamrock
Opelika, AL 36801

Norris, Lynn
257 S. Gay St., 203A Dexter
Arms
Auburn, AL 36830

Northam, Wanda, Coordinator
Special Education
P.O. Box 1379
Vernon, AL 35592

Nowell, Carl H.
State Supervisor
2129 East South Blvd.
Montgomery, AL 36111

Nutt, Linda M.
Transition Coordinator
Futures Unlimited
P.O. Box 1730
Tuscaloosa, AL 35401

O'Connell, Linda M.,
Coordinator
Special Populations/Transition
309 Farst Ave.
Ozark, AL 36360

Odom, Cindy, Teacher
Special Education
502 Maloy St.
Opp, AL 36467

Parker, Pamella Hicks,
Coordinator
Special Populations/Transition
144 Highland Ave.
Trussville, AL 35173

Patterson, David G., Counselor
Rehabilitation Services (Liason)
1104 Haley Center

Penn, Lorraine, Counselor
Rehabilitation Services
2127 East South Blvd.
Montgomery, AL 36199

Perkins, Todd, Planner
Regional Employment
3280 Dauphin St., Bldg A, Ste 102
Mobile, AL 36606

Petkas, Emmanuel
Program Coordinator
#2 Peachtree St., Suite 23-102
Atlanta, GA 30303

Pettis, Martha
Technical Specialist
P O Box 698
Talladega, AL 35160

Phyfer, Emily, Coordinator
Special Education
P.O. Box 66
Mt. Meigs, AL 36057

Pierce, Tom
Rehabilitation Services
2129 East South Blvd.
Montgomery, AL 36111

Pilgreen, Jenny, Teacher
Shelby Co. HS
207 Heath Dr.
Birmingham, AL 35242

Porter, Debbie C., Teacher (EMR)
Special Education
Daphne High School
1710 Perch Drive
Mobile, AL 36605

Privett, Joy, Teacher (LD)
Special Education
322 4th Ave., NW
Arab, AL 35016

Pruitt, Chuch, Teacher
P.O. Box 1047
Tuscaloosa, AL 35403

Pulmas, Bernita, Director
Special Student Services
UC-270 Univ. of S. Alabama
Mobile, AL 36688

Purvis, Kathryn, Case Manager
901 S. 13th St.
Birmingham, AL 35294

Rabait, Philip, Counselor II
236 Goodwin Crest Dr.
Homewood, AL 35209

Rasbury, Bari, Teacher (EMR)
Special Education
P.O. Box 1006
Troy, AL 36081

Rizzuto, Marti, Supervisor
Special Education
110 Johnston St., SE
Decatur, AL 35601

Roden, Jamie
Transition Coordinator
604 S. Sparkman
Hartselle, AL 35640

Roth, Dan, Teacher
5191 Pine Whispers
Birmingham, AL 35210

Rowden, Velma
Clarke County
Grove Hill, AL 36451

Ruddick, Jane, Coordinator
State Employment
P.O. Box 3710
Montgomery, AL 36109

Russell, Danny T, Counselor
Rehabilitation Services
P.O. Box 1686
Decatur. A: 35602

Russell, Doug, Coordinator
School-to-Work
P.O. Box 109
Athens, AL 35611

Russell, Pam, Aide I
400-A Edison Ave.
Muscle Shoals, AL 35661

Rutledge, Pat, Director
Special Education
P O Box 400
Phenix City, AL 36869

Rysedorph, Cindy, Teacher
Special Opportunities
3650 Bethune
Birmingham, AL 35223

Saberman, Anita M., Coordinator
Special Population
800 Kelly Fitzpatrick Dr.
Wetumpka, AL 36092

Salatto, Susan, Director
Student Development
Roberts Street
Wadley, AL 36276

Sartain, John, Teacher
P O Box 698
Talladega, AL 35160

Satcher, Jamie, Project Director
University of Alabama
Box 870304
Tuscaloosa, AL 35487

Sherburne, Tom, Instructor
Department of Psychology
Auburn University, AL 36849

Shirley, Ann, Counselor
Rehabilitation Services
P.O. Box 19888
Homewood, AL 35219-0888

Sherman, Anita, Coordinator
Special Populations
800 Kelly Fitzpatrick Dr.
Wetempka, AL 36092

Simmons, Diane, Coordinator
Special Education
Tallapoosa Co. Bd. of Ed.
Dadeville, AL 35010

Simpson, Ginny, Teacher
Special Education
405 South Dean Rd.
Auburn, AL 36830

Siniard, Sheryl, Teacher (TMR)
Special Education
2424 Lee Rd. 241
Salem, AL 36874

Smart, Wayne, Teacher
Occupational Transition
Rte. 1, Box 159-E
Piedmont, AL 36272

Smith, Chris, Vocational
Evaluator
510 W. Thomason Circle
Opelika, AL 36801

Smith, Lynn, Coordinator
Special Population
1109 Woodstock Ave.
Anniston, AL 36201

Smith, Mary, Coordinator
Special Education
420 Samfor Ave.
Eufaula, AL 36027

Smith, Ralph, Counselor
Rehabilitatin Services
2419 Gordon Smith Dr.
Mobile, AL 36617-2395

Smith, Virginia, Coordinator
P O Box 2216
Decatur, AL 35609

Sparks, Celeste S., Ed.D.
JTPA State Specialist
313 Avon Road
Montgomery, AL 36109

Sparks, Mary, JTPA Job Coach
405 South Dean Rd.
Auburn, AL 36830

Spencer, Mary, Teacher (LD)
Special Education
1802 Fairmont Rd.
Huntsville, AL 35801

Spradlin, Karen, Teacher (Multi)
Special Education
903 South Railroad St.
Phenix City, AL 36867

Spradlin, Rick, Teacher (EC)
Special Education
South Girard School
521 Fontaine Rd.
Phenix City, AL 36869

Sprayberry, David
Transition Coordinator
500 Dusy St.
Dothan, AL 36301

Standifer, Carol, Coordinator
Special Education
#3 Church Street
Birmingham, AL

Stanfield, James, Coordinator
Special Education
3441 LeBron Rd.
Montgomery, AL 36111

Stanger, Debbie, Teacher (LD)
Special Education
405 South Dean Rd.
Auburn, AL 36830

Steele, Linda, Teacher (MR)
Special Education
P.O. Box 399
Fairfield, AL 35064

Stephens, Anne R., Counselor
Rehabilitation Services
520 W. Thomason Circle
Opelika, AL 36801

Stephens, Gloria, Counselor
P O Box 2216
Decatur, AL 35609

Stewart, Bernard D., Counselor
Rehabilitation Services
807 8th Ave.
Andalusia, AL 36420

Stewart, Beth, Teacher (MR)
Special Education
1206 Denson Dr.
Opelika, AL 36801

Stewart, Jean, Counselor
Rehabilitation Services
P.O. Box 1005

Stewart, Kathy, Counselor
Rehabilitation Services
P.O. Box 1005
Jackson, AL 36545

Stolsworth, Gloria, Counselor
Rehabilitation Services
P.O. Box 2388
Muscle Shoals, AL 35663-2388

Terry, Karen, IEP Supervisor
P.O. Box 1230
Bessemer, AL 35021

Thead, David, Program Manager
1709 Mahan Dr.
Tallahassee, FL 32308

Thetford, Gina, Director
MR Services
Baldwin Co. MH/MR Inc.
P.O. Box 1491
Foley, AL 36536

Thomas, Ruth Anne
Transition Work Specialist
800 Kelly Fitzpatrick Dr.
Wetumpka, AL 36092

Thrasher, Lavell, Coordinator
Special Education
P O Box 887
Cullman, AL 35055

Trammell, Verdell, Teacher
(MR)
Special Education
P.O. Box 399
Fairfield, AL 35064

Tripp, Margaret, Teacher
Special Education Resource
1300 28th St., S. #C1
Birmingham, AL 35205

Turnbull, Ann, Co-Director
Beach Center on Families and
Disability
c/o Life Span Institute
3111 Haworth Hall
University of Kansas
Lawrence, KS 66045

Turner, J.C., Teacher
Special Education
108 Sherwood Ave.
Troy, AL 36081

Wagner, Donna, Director
Counseling & Testing
Bevill State Community College
Sumiton, AL 35148

Walker, Mary, Counselor
Rehabilitation Services
922 5th Ave., E
Tuscaloosa, AL 35401

Walters, Joe, Coordinator
Special Populations
109 College St. NW
Hartselle, AL 35640

Walters-Kemp, Phyllis, Counselor
Box 870304
Tuscaloosa, AL 35487

Washington, Sandra, Teacher
P.O. Box 66
Mt. Meigs, AL 36057

Watson, Merle, Supervisor
Vocational Training
3700 Richelieu Dr.
Birmingham, AL 35216

Watson, Robert W., Supervisor
Rehabilitation Services
1105 Woodstock Ave.
Anniston, AL 36201

Walter, Paul S., Counselor
Rehabilitation Services
2419 Gordon Smith Dr
Mobile, AL 36617-2395

Ward, Sandra C., Counselor
Rehabilitation Services
P.O. Box 19888
Homewood, AL 35219-0888

Watters, Rayslyn H.
CABS Lab Teacher
510 12th St., Ensley
Birmingham, AL 35211

Weant, Judy, Teacher
Rt. 2 Box 100A
Dozier, AL 36028

Welch, Ronnie, Program Coordinator
P.O. Box 338
Dothan, AL 36302

Wesley, Kim
Service Coordinator
800 Main St.
Gardendale, AL 35071

West, Ann, JTPA Specialist
Rt 3, Box 68
Haleyville, AL 35565

Whaley, Coy S., Specialist
JTPA Transition
2127 East South Blvd.
Montgomery, AL 36199-3801

Whatley, June, Teacher
Special Education
4207 Sunny Lane
Phenix City, AL 36867

Whetstone, Mabrey, Educational
Specialist
50 N. Ripley
Montgomery, AL 36130

White, Charlotte, Job Coach
1300 37th St., East
Tuscaloosa, AL 35405

Whitehead, Jr., Louie F.
Counselor, Rehabilitation
2127 E. South Blvd.
Montgomery, AL 36116

Wiggins, Tricia, Service Coordinator
P.O. Box 1730
Tuscaloosa, AL 35403-1730

Wilkerson, Patrick
#4 Medical Office Park
Talladega, AL 35160

Williamson, Jack
Program Specialist
701 Hwy 70
Columbiana, AL 35051

Williamson, Jay, Supervisor
Rehabilitation Services
2419 Gordon Smith Dr.
Mobile, AL 36617

Williamson, Micah, Counselor
Rehabilitation Services
1100 George Wallace Dr.
Gadsden, AL 35999-6510
Williamson, Pamela, Director
Counseling Services
3601 U S Hwy 231 North
Dothan, AL 36303

Wood, Lou Ann, Counselor
P.O. Box 2216
Decatur, AL 35620

Woods, Elouise, Mentor
Self-Advocacy
P.O. Box 1730
Tuscaloosa, AL 35403

Wyatt, Ferral, Teacher
Vocational Preparation
2826 Maxwell Loop Rd.
Tuscaloosa, AL 35405

Wyatt, Kathy, Counselor
Rehabilitation Services
807 Eight Ave.
Andalusia, AL 36420

York, Glenn D.
Employment Planner
P.O. 853
Scottsboro, AL 35768

Yother, Milly
Speech Pathologist
170 Fairoak St.
Gadsden, AL 35901

Zeanah, Shelby, ADA
Coordinator
2631 N. Temple Ave.
Fayette, AL 35555

CUMULATIVE Author and Subject INDEX

This is a Cumulative Index for the four published proceedings of the Alabama Conference on Transition. Note that columns I, II, III, and IV are the proceedings (and respective page) in which the author's contribution appears.

AUTHORS	I	II	III	IV
Adams			42	
Amberson				7
Beadles				69
Bice			50	
Boswell	31, 39			
Brandt				40
Brechin	77	61, 69		
Brown		83	68	130
Browning	31, 39, 69	61, 69, 83	76, 93	132
Butler			50	
Carson				33
Chance				114
Christian				34
Clemmons			33	
Crowder			46	
Curtis			106	69
Dear				10
Diaz			42	
Dunnaway	83			
Jackson				22
Johnson			50	

AUTHORS	I	II	III	IV
Dunn		47, 83	76	127, 132
Echols				84
Elliot	65			
English	83, 87			
Falkner			33	
Fields				32
Friend			54	
Gillepsie				35
Glisson			106	69
Halloran		1		
Halpern	1			
Hames				35
Harris			50	
Haynes		55	65	
Hilderbrand		31		20, 37, 46
Hilton	53		33	
Holmes				
Houser	65			
Hutt			46	
Sasser	53			
Satcher			62	

AUTHORS	I	II	III	IV	AUTHORS	I	II	III	IV
Jones			43		Sherburn				106
Larkin				84	Shumaker				121, 132
Lavender	63		68	31	Smith		15		10, 16
Lingenfelter				10	Sprayberry	53			
Markve				106	Statum				65
McClanahan				87	Stokes		39		
McGee		62			Stringer	53			
Morris				106	Symanski		17		
Moore		3			Tedder				vii
Parker	59				Toler			59	
Parry			111		Turnbull				51, 55
Pope			21		Turnage		39	46	
Purvis				22	West			59	
Rabren				132	Whetstone	31, 39, 49	91		25
Reams			43		Williams				77
Reed		35			Winchester				77
Rudd		42			Witherington			14	
Rudrud				106	Woods			46	

MAJOR SUBJECT INDEX HEADINGS

- ALABAMA
- ASSESSMENT
- AUBURN
- BIRMINGHAM
- CONSUMERS
- CURRICULA
- FAMILIES/PARENTS
- IEP/ITP
- JOB PLACEMENT RESOURCES
- KEYNOTE ADDRESSES
- LITERATURE REVIEWS ON:
- POST-SECONDARY EDUCATION
- REHABILITATION COUNSELORS
- RURAL TRANSITION
- SCHOOL REFORMS
- SELF-ADVOCACY
- SELF-DETERMINATION
- SPECIAL EDUCATION TEACHERS (secondary)
- STUDENTS
- SUPPORTED EMPLOYMENT
- TRANSITION
- TUSCALOOSA
- UNIVERSITIES/COLLEGES
- VOCATIONAL PREPARATION/PLACEMENT
- WORK-EXPERIENCE PROGRAMS

	I	II	III	IV
•ALABAMA				
Agencies (state)				
Division of Rehabilitation Services	34			32,46
Division of Special Education Services	34			25
Division of Vocational Education	34			
Mental Health/Mental Retardation	34	39	46	35
Cities				
Anniston				10
Auburn			65,68,76	123,130,132
Birmingham (Jefferson County)	59	55	50,59	22,33,35
Decatur				7
Dothan	53			
Mobile		31		20,37,46
Tusculoosa		39	46,62,54	40
Countys				
Calhoun				16,34
Cullman			33	
Elmore		42		
Jefferson (Birmingham city)	63,		38	
Marshall		35		
Mobile		31		20,37,46
Tusculoosa		39	46,62,54	40
Functional assessment	41,99	61,111	38	
Functional curricula (also see Curricula)		47,113		
Grants for work experience programs	36,50			
Guidelines for Transition Manual	35			
Interagency cooperation/collaboration				
Alabama's rehah counselors		72		
Alabama's special ed. teachers/coordinators		85,87		
Alabama's MH/MR Transagency Model		39		
Assessment (collaborative) program		65		
Literature on		120		
Team building				7
Job Readiness Program	35			
Personnel (transition)				
•ALABAMA (concluded)				
Special Education Teachers	83			128

	I	II	III	IV
Special Education Coordinators	83			
Rehabilitation Counselors		69	111	46
Job Coaches				11,111,130
Research (statewide studies)				
rehabilitation counselors		69		
special ed. teachers/coordinators		83		
Distance learning				136
Transition Teams				7,20
University/College programs				
Auburn University		55	65,76,68	127,130,132
Auburn University at Montgomery			1	
Calhoun Community College				16
University of Alabama			62,54	40
University of Alabama-Birmingham			59	22
•ASSESSMENT				
Alabama's rehab counselors (importance of)		72,77		
Collaborative assessment		65		
Definition (functional)	41	64		
Functional vs. traditional		61		
General	41	72,77	33	
Literature on	99	67,111		
Pilot assessment program (Jefferson County)			38	38
Systematic assessment		66		
•AUBURN				
Distanct learning				132
Job Coaches				130
Program for Auburn Students with Disabilities		55		
Real-time captioning			65	
Research (statewide studies)		69,83		
Secondary Teacher Preparation Program			76	127
Transition course			68	
•BIRMINGHAM				
"Choice Access" Project				33
•BIRMINGHAM (concluded)				
Easter Seal's Occupational Rehabilitation Center	59			
Gardendale's Work Experience Program			50	
Horizon's Program (UAB)			59	

	I	II	III	IV
Lakeshore's LD Project				35
Student Transitional Education Program (STEP)				59
Suppoted Employment				33
•CHOICE-MAKING (see Self-determination)				
•CONSUMERS				
Students (see)				
Empowerment		22	102	
Families (see)				
Futures Unlimited		39	46	
Personal Stories			1,49	vii,55,65,87
Self-Advocacy/self-determination (see)				
•CURRICULA				
Alabama's movement toward a functional curricula	50			
Alabama's rehab counselors (importance of)		73		
Definition (functional)		48		
Functional vs. academic		7		
General	42	47		
Language Cookbook for Transition			42	
Life Centered Career Education Curriculum	26	49		25
Life Skills Curriculum				33
Literature on	103	49,113		
Materials/Kits (commercial)				
•Community Living Skills		50		
•Delivering Transition Skills Curriculum		52		
•Functional Living Skills (Moderat & Severely)		49		
•Self-advocacy			102	
•Working II-Interpersonal Employment Skills				
Self-Advocacy Curriculum		73		
Self-determination skills				
goal-setting			100	
•CURRICULA (concluded)				
requesting assistance			100	
social problem-solving			99	
Social Skills				114
•FAMILIES/PARENTS				
A parent's perspective			42	55,65,87,95

	I	II	III	IV
Alabama's rehab counselors (importance of)			72	
Empowerment		22	102	55
Inclusion				65
Involvement in transition	84	72		65,84,87,95
"GROUP ACTION PLANNING"				51,55
Legal guardian				87
Literature review				95
Multicultural				77
Needs	83			
Parent Awareness Program in transition			32	
Perception of transition	87			
Policy recommendations	88			
Problem identification				69
Role in transition	16			
Strategies for involvement	84			
Student-parent participation		72		55,65,87,95
•IEP/ITP				
IDEA (questions and answers)		91		
Joint meetings				37
LCCE IEP/ITP Forms				25
Vocational rehabilitation				46
•JOB PLACEMENT RESOURCES				
Americans with Disabilities Act	81			
ARC for on-job training	78			
Job Training Partnership Act	79			
Social Security Work Incentives	80	43		
Targeted Job Tax Credit	79			
Vocational Rehabilitation on-the-job Training	78			
•KEYNOTE ADDRESSES				
Brolin	21			
Browning			93	
Halloran		1		
Halpern	1			
Moore			3	
Symanski		17		
Turnbull				55

	I	II	III	IV
•LITERATURE REVIEWS ON:				
Assessment (functional)	99	111		
Community preparation		117		
Curricula (functional)	103	113		
Deaf in transition				121
Family involvement				95
Interagency collaboration		120		
Self-advocacy		118		
Self-determination		118		
Transition (foundational)	91	109		
Vocational preparation		115		
•PARENTS (see Families)				
•POST-SECONDARY EDUCATION				
Auburn University		55		
Auburn University at Montgomery	1			
Calhoun Community College				16
University of Alabama			62,54	40
University of Alabama Birmingham			59	22
•REHABILITATION COUNSELORS				
Alabama's rehab counselors (statewide survey)				
IEP/IWRP		69,71		
Client/parent participation		71,72		
Assessment		76,77		
Vocational preparation		72,77		
Coordination of services		73,78		
Rehabilitation outcome		73,79		
• REHAB COUNSELORS (concluded)				
Competency areas related to transition		74		
Counselors' role in transition			111	
•RURAL TRANSITION (exemplary programs)				106
•SCHOOL REFORMS				
Educational reform	9			
High school completion		7		
Social reform	15			
Secondary curriculum		6		

	I	II	III	IV
•SELF-ADVOCACY				
Curriculum	73		102	
Definition/issues	72			40
Futures Unlimited		39	46	
Program			46	
U of A's Approach				40
•SELF-DETERMINATION				
"Choice Access" Project				33
Choice-making			94	
Definitions			94	
Federal initiative		5		
Literature on		118	103	
Opportunities			102	
Self-Advocacy (see)				
Strategies			97	
•SPECIAL EDUCATION TEACHERS (secondary)				
Alabama's statewide study		83		
Teacher preparation program (Auburn University)			76	127
•STUDENTS				
Exiting statistics	31			
Drop-out rate	31			
Empowerment		22		
Graduation rate	31			
Employment status	32,49			
Follow-along system	44			
•STUDENTS (concluded)				
Follow-up studies		1		
Personal stories			1	vii
Post-secondary education (see)				
Self-advocacy (see)				
Self-determination (see)				
Social skills				114
Tracking	14			
•SUPPORTED EMPLOYMENT				
Birmingham	59			33
Definition				106
Enclave model				107

	I	II	III	IV
Enterpreneurial model				109
Gardendale High	59			
Individual placement model				107
Mobel work crew model				107
Rural areas (in)				106
•TRANSITION				
Definitions				
Brolin	33			
Career Development's (CEC) new Definition				1
Halpern				1
IDEAs		3		2
Life span considerations	33	20		
Wills (OSERS)				
Federal initiatives (also see School Reforms)				
anticipated Service Needs		9		
high School completion		7		
public policy alignment		10		
secondary curriculum		6		
self-determination		5		
Historical movements				
cooperative work study programs	2			
career Education	4			
transition	6			
•TRANSITION (concluded)				
comparison	7			
the future	9			
IDEAS and transition		94		2
Literature on (foundation of)	91	109		
Problems (also see Federal initiatives above)				
limited adult service involvement	23			
inadequate school preparation	21			
limited parent involvement	22			
lack of community partnerships	23			
reluctance to change				
Reforms (see School Reforms)	24			
•TUSCALOOSA				
Families (speak up)			46	

	I	II	III	IV
Futures Unlimited		39	46	
LD Bridges to Careers Success Project (U of A)			62	
Project BOLD			54	
Self-Advocacy				40
•UNIVERSITIES/COLLEGES				
Auburn University				
Distanct learning				132
Job Coaches				130
Secondary Teacher Preparation Program			76	127
Program for Auburn Students with Disabilities		55		
Transition course			68	
Auburn University at Montgomery			1	
Calhoun Community College				16
University of Alabama				
Project BOLD			54	
LD Bridges to Careers Success Project			62	
Self-advocacy				40
University of Alabama at Birmingham				
The Horizon's Program			59	22
•VOCATIONAL PREPARATION/PLACEMENT				
Alabama's Division of Rehabilitation Services	31			32,46
•VOCATIONAL PREP/PLACEMENT (concluded)				
Apprentice Vocational Programs	11			
Curricula				
Community Living Skills		50		
Job Readiness Curriculum	35			
Working II - Interpersonal Skills Employment		50		
Literature on	103	115		
Alabama's rehabilitation counselors		73		
Alabama's special education teachers		83		
Rehabilitation counseling				
Alabama's statewide study		69,81		
Role responsibility			111	
Special Education teachers/coordinators		83		
Alabama's statewide study		83		
Resources for job placement				
Americans with Disabilities Act	81			

	I	II	III	IV
ARC on-job training	78			
Job Training Partnership Act	79			
Social Security Work Incentives	80	43		
Targeted Job Tax Credit	79			
Vocational Rehabilitation on-the-job Training	78			
Work experience Prgrams (see)				
•WORK-EXPERIENCE PROGRAMS				
Anniston				10
Birmingham	60			
Cullman		29	33	
Decatur				7
Dothan	53			
Elmore			42	
Gardendale	59			
Jefferson County	63			
Marshall		36		
Mobile		31		

AUBURN MATERIALS ON TRANSITION

- **Transition IV in Alabama: A Profile of Commitment**: The proceedings (and more) from Alabama's **4th** Annual Statewide Transition Conference. The first major section consists of 10 papers pertaining to transition programs and projects in Alabama. The second major section includes eight papers on family involvement in transition, including the keynote address of Dr. Ann Turnbull, Co-Director of the Beach Center on Families and Disability, University of Kansas. Among the remaining papers, several are devoted to three new training grants awarded to Auburn University for preservice and inservice training for Alabama's Transition personnel. These proceedings also provide a culmulative subject and author index for the last four conference proceedings (68 pictures, 166 pages, $6.00)

- **Transition III in Alabama: A Profile of Commitment**: The proceedings (and more) from Alabama's **3rd** Annual Statewide Transition Conference. The first section focuses on the "Personal Stories told by Students in Transition. In addition, 15 other papers are included, most of which pertain to issues, programs, and services in the state. These proceedings also provide a culmulative subject and author index for the last three conference proceedings (44 pictures, 146 pages, $6.00)

- **Transition II in Alabama: A Profile of Commitment**: The proceedings (and more) from Alabama's **2nd** Annual Statewide Transition Conference. Section One, **The National Scene**, includes the keynote addresses delivered by two national leaders in transition, Drs. Halloran and Szymanski. Section Two, **A Window to Alabama's Commitment**, includes 10 papers on issues, programs, and services in the state. Section Three, **A Window to the Transition Literature**, includes 146 references grouped under (a) a Foundation, (b) Functional Assessment, (c) Functional Curricula, (d) Vocational Preparation, (e) Community Preparation, (f) Self-Determination, and (g) Interagency. (34 pictures, 139 pages, $6.00)

- **Transition I in Alabama: A Profile of Commitment**: The proceedings (and more) from Alabama's **1st** Annual Statewide Transition Conference.Section One, **The National Scene**, includes the keynote addresses delivered by two national leaders in transition, Drs. Halpern and Brolin. Section Two, **A Window to Alabama's Commitment**, includes 11 papers on issues, programs, and services in the state. Section Three, **Resources**, includes 64 annotated references. (30 pictures, 122 pages, $6.00)

- **Alabama's Secondary Special Education Programs: An Examination**: This study documents the needs of Alabama's secondary educational programs and services for youth with disabilities. The collective responses from 79 special education **coordinators** and 302 secondary special education **teachers**, who represent the city and county school systems throughout the 12 educational regions, are presented by over 70 Summary Highlight Statements. The findings serve as guidelines for needed areas of program development and improvement. (101 pages, 37 tables and adjoining graphs, $6.00)

- **Disabled Youth in Transition: A Literature Resource**: This publication is an annotation of over 200 transition-related books, journal articles, tests, curriculums, and monographs. These resources are provided under the content areas of (a) A Foundation in Transition, (b) Vocational-Career Development, (c) Community/Independent Living, (d) Functional Curriculum/Instruction, (e) Programs/Services, (f) Research, and (g) other Information Resources. (69 pages, $3.00)

also, reprints are available for:

Browning, P., Dunn, C., Shumaker, L, & Rabren, K. (1994). Distance education: Another Auburn strategy for training transition personnel in Alabama. *Alabama Council for Exceptional Children Journal, 11*(2), 32-37.

Browning, P., & Dunn, C. (1993). Teacher preparation with an emphasis at the secondary level. *Alabama Council for Exceptional Children Journal. 11*, 3-12.

Browning, P., & Brechin, C. (1993). Alabama's rehabilitation transition counselor's: A statewide study. *Alabama Council for Exceptional Children Journal. 10*(1), 3-9.

Browning, P., Brown, C., & Dunn, C. (1993). Vocational preparation and interagency cooperation with Alabama's secondary special education programs. *Alabama Council for Exceptional Children Journal. 10*(2), 3-12.

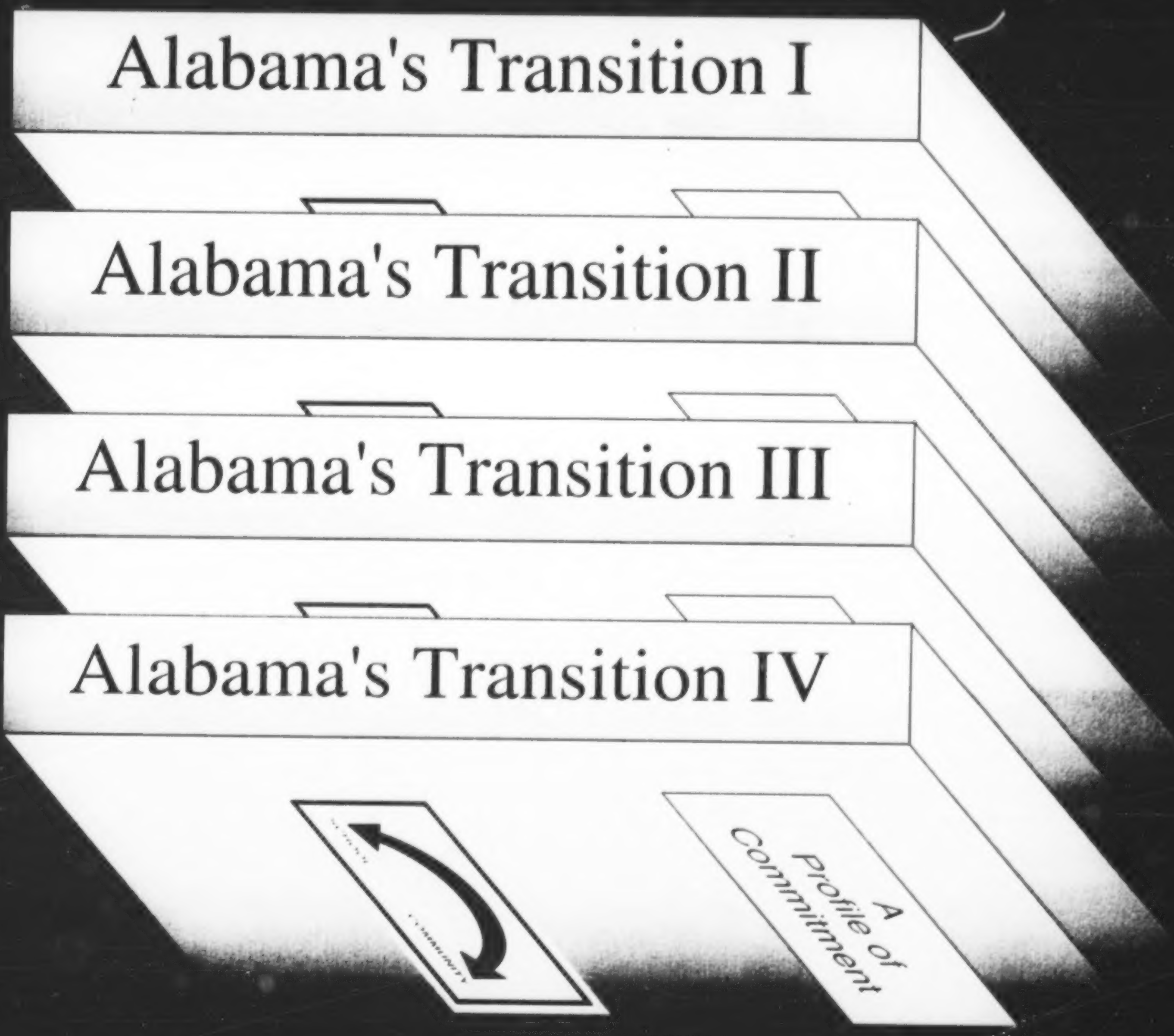
ORDER FORM

			Copies		
Transition IV Proceedings	**$6.00**	**X**	___	=	_____
Transition III Proceedings	**$6.00**	**X**	___	=	_____
Transition II Proceedings	**$6.00**	**X**	___	=	_____
Transition I Proceedings	**$6.00**	**X**	___	=	_____
Alabama's Secondary Programs: An Examination	**$6.00**	**X**	___	=	_____
Transition Literature Resources	**$3.00**	**X**	___	=	_____

TOTAL $ = ____

Department of Rehabilitation and Special Education
3013 Haley Center
Auburn University, AL 36849

make checks payable to: Auburn University


Alabama's Transition I
Alabama's Transition II
Alabama's Transition III
Alabama's Transition IV
A Profile of Commitment

BEST COPY AVAILABLE